

# Multicomponent Interventions to Increase Screening for Breast, Cervical, and Colorectal Cancer

## Summary Evidence Table

### Abbreviations Used in This Document:

- Intervention components:
  - CI: client incentive
  - CR: client reminder
  - GE: group education
  - MM: mass media
  - OE: one-on-one education
  - PAF: provider assessment and feedback
  - PI: provider incentive
  - PR: provider reminder
  - ROPC: reducing out-of-pocket costs
  - RSB: reducing structural barriers
  - SM: small media
- Screening types
  - Flex sig: flexible sigmoidoscopy
  - FOBT: fecal occult blood test
  - MAM: mammography
  - Pap: Papanicolaou test
- Cancer types
  - BC: breast cancer
  - CC: cervical cancer
  - CRC: colorectal cancer
- Study design
  - NRT: non-randomized trial
  - RCT: randomized trial
- Other terms:
  - UTD: up-to-date

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Ahmed 2010</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Tennessee, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> Tennessee Coordinated Care Network, a network of MCOs serving healthcare needs of the working poor.</p> <p><b>Intervention Duration:</b> 1999-2001</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: CR1 Arm 2: CR2 + OE Control: Usual care</p> <p>CR1: reminder letter from MCO director CR2: reminder letter from MCO director and follow-up reminder letter from personal PCP at 3 months post initial letter if no MAM had taken place OE: contacted by Community Health Outreach to discuss MAM if at 3 months post CR2 no MAM had taken place Usual care: monthly newsletters on a variety of health topics, health pamphlets, and access to Community Health Outreach workers</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Women aged 40 years and older without a history of breast cancer whose claims data indicated noncompliance with MAM screening in previous 2 years (for women 50 years and older) or 3 years (for women 40-49 years).</p> <p><b>Sample Size:</b> 2,357</p> <p><b>Attrition:</b> 3.9% (31/789)</p> <p><b>Demographics:</b> Age: mean age 52.8 Gender: 100% female Race/Ethnicity: 45.1% White; 42.8% African American; 12.2% Hispanic Income: mean annual \$8,447; median annual \$6,994 Education: NR Insurance: 100% insured Foreign-born status: NR Co-morbidity: NR Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> Completed MAM during 1 year intervention period</p> <p><b>How Ascertained:</b> In-house medical records database</p> <p><b>Follow-up Time:</b> 1 year</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 2: 213/786 = 27.1% Control: 105/786 = 13.4% <b>Difference: 13.7 pct pts, p&lt;0.001</b></p> <p><b>Incremental effectiveness:</b> adding OE Arm 1: 126/785 = 16.1% Arm 2: 213/786 = 27.1% <b>Difference: 11.0 pct pts (7.0, 15.1)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Allen 2005</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> California, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> 1996-2000 (6 month intervention period)</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: OE + RSB + ROPC Control: usual care</p> <p>OE: telephone counseling providing information on BC and mailed intervention materials RSB: telephone call included option to schedule MAM ROPC: low-cost or no-cost MAM appointments Usual care: telephone call to determine MAM status since enrollment call</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Women living in King/Drew Medical Center service area who had an operable telephone, were aged 40 years and older, and had not had a MAM in past year.</p> <p><b>Sample Size:</b> 430</p> <p><b>Attrition:</b> 17.7% (76/430)</p> <p><b>Demographics:</b> Age: 56.5% 40-49; 27.0% 50-64; 15.6% ≥65 Gender: 100% female Race/Ethnicity: 38.1% African American; 44.9% Hispanic; 17.0% other Income: 46.7% \$0-19,000; 32.6% \$20,000-29,000; 20.7% not stated Education: 60.9% ≤HS; 30.1% &gt;HS Insurance: 64.4% insured; 35.6% uninsured Foreign-born status: NR Co-morbidity: NR Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> Completed MAM in 6 months post-intervention</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 68/185 = 36.8% Control: 49/169 = 29.0% <b>Difference: 7.8 pct pts, p=0.121</b></p>

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<p><b>Author, Year:</b> Aragones 2010</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> New York, US</p> <p><b>Setting:</b> Primary Care Clinic</p> <p><b>Health System Factors:</b> EMR; large teaching hospital caring for large, diverse underserved population.</p> <p><b>Intervention Duration:</b> September 2006 – May 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: SM + PR Control: usual care</p> <p>SM: Spanish language CRC educational video on portable DVD player while patients waited for visits; video accompanied by brochure in Spanish with key information from video PR: patients given 1-page reminder to hand to physicians notifying them of CRC screening eligibility Usual care: NR</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Latino immigrant, Spanish-speaking patients, aged 50 years or older, who used the primary care facility as their regular source of care for at least the previous two years. Excluded patients UTD with CRC screening, those with gastrointestinal symptoms, a personal history of cancer, a family history of CRC, those who had a visit with a physician with a patient already enrolled in the study, and those who did not consent to participate.</p> <p><b>Sample Size:</b> 65</p> <p><b>Attrition:</b> 0%</p> <p><b>Demographics:</b> Age: mean age 58.2 Gender: 49.2% male; 50.1% female Race/Ethnicity: 65% Hispanic Income: NR Education: 29.2% ≤ 6<sup>th</sup> grade; 70.1% ≥ 7<sup>th</sup> grade Insurance: 61.5% insured Foreign-born status: mean years since migrated to US 25.5 Co-morbidity: NR Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> CRC screening completion</p> <p><b>How Ascertained:</b> EMR</p> <p><b>Follow-up Time:</b> 3 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 17/31 = 54.8% Control: 6/34 = 17.6% <b>Difference: 37.2 pct pts (15.5, 58.9)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Armelaio 2010</p> <p><b>Study Design:</b> Prospective cohort</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Italy</p> <p><b>Setting:</b> Community and clinic (practices are located in community hospitals)</p> <p><b>Health System Factors:</b> Public health system model – systematic, organized screening program</p> <p><b>Intervention Duration:</b> July 2005 – December 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (colonoscopy)</p> <p>Arm 1: SM1 + MM Arm 2: SM2 + MM + OE + ROPC + PI</p> <p>SM1: public education campaign consisting of leaflets and posters distributed to medical offices and hospitals SM2: SM1 plus standard letter providing information on CRC and colonoscopy MM: public education campaign involving local media OE: flexible appointments offered for counseling and providing colonoscopy information ROPC: every procedure, except preparation of colon, was free of charge PI: gastroenterologists received 60€ for each colposcopy performed</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> First degree relatives of patients with newly diagnosed CRC beginning in December 2005 and (1) either aged 45 to 75 or up to 10 years younger than the youngest case of CRC in family and (2) resident of the Trentino Health Region. Excluded if colonoscopy or BE in prior 5 years or history of familial polyposis or Lynch syndrome, IBD, and/or sever comorbidity with reduced life expectancy.</p> <p><b>Sample Size:</b> 812</p> <p><b>Attrition:</b> 16.0% (130/812)</p> <p><b>Demographics:</b> Age: mean age 57.6 Gender: 51.4% male; 48.6% female Race/Ethnicity: NR Income: NR Education: NR Insurance: publically funded healthcare system Foreign-born status: NR Co-morbidity: severe comorbidities excluded Baseline screening: NR (colonoscopy or BE in prior 5 years excluded from sample)</p>	<p><b>Outcome Measure:</b> Completed colonoscopy by December 1, 2007</p> <p><b>How Ascertained:</b> Screening program records</p> <p><b>Follow-up Time:</b> Up to 24 months</p> <p><b>Results:</b> <b>Incremental effectiveness:</b> Arm 1: 7/87 = 8.0% Arm 2: 550/709 = 77.6% <b>Difference: 69.6 pct pts, p &lt;0.0001</b></p>

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<p><b>Author, Year:</b> Biswas 2005</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> United Kingdom</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> EMR; computerized system (COMWISE) for registering people in contact with NHS</p> <p><b>Intervention Duration:</b> NR</p> <p><b>Intervention Details:</b> Type of cancer addressed: cervical cancer</p> <p>Arm 1: OE + RSB</p> <p>OE: nurses provided information on CC and addressed barriers to care RSB: assistance with appointment scheduling</p> <p><b>Presence of CHW/LHA/PN:</b> Clinical educator</p>	<p><b>Eligibility Criteria:</b> Women aged 20 to 64 years with moderate and high learning disabilities.</p> <p><b>Sample Size:</b> 235</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: range 20-64 Gender: 100% female Race/Ethnicity: NR Income: NR Education: NR Insurance: universal coverage Foreign-born status: NR Co-morbidity: learning disabilities Baseline screening: 5.6% never screened; 16.3% UTD; 78.1% not UTD</p>	<p><b>Outcome Measure:</b> Pap within 3 years</p> <p><b>How Ascertained:</b> Chart views</p> <p><b>Follow-up Time:</b> NR</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Pre Post Arm 1: 26/160=16.3% 35/160=21.9% <b>Change: 5.6 pct pts (-3.0, 14.2)</b></p>

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<p><b>Author, Year:</b> Blumenthal 2005</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Georgia &amp; Tennessee, US</p> <p><b>Setting:</b> Community; hospital conference center</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> Fall 1994 – Spring 1996</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and cervical cancer</p> <p>Arm 1: MM1 + SM + GE Arm 2: MM2+ SM + GE Control 1: usual care Control 2: usual care</p> <p>MM1: campus newsletters and yard sign advertisements MM2: targeted newspaper, radio, television and bus advertisements SM: targeted brochures, church bulletins, and posters providing information on cancer and screenings GE: targeted workshops, presentations and lectures at public health clinics, community organizations, churches, businesses Usual care: control groups received nothing</p> <p><b>Presence of CHW/LHA/PN:</b> Other deliverer</p>	<p><b>Eligibility Criteria:</b> Black or African-American women aged 18 years or older who lived in census tracts with high proportion of black residents.</p> <p><b>Sample Size:</b> 7967</p> <p><b>Attrition:</b> Range 33.5% - 22.9%</p> <p><b>Demographics:</b> Age: ≥40 BC; ≥18 CC Gender: 100% female Race/Ethnicity: 100% African American Income: 25% &lt; \$10,000 Education: average of 20% had &lt;HS Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: 69.1% UTD BC; 84.0% UTD CC</p>	<p><b>Outcome Measure:</b> 1. Completed MAM in past 2 years 2. Completed Pap in past 2 years</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 2 years</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <p>1. Completed MAM in past 2 years:</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>65.9%</td> <td>74.3%</td> <td>8.4 pct pts</td> </tr> <tr> <td>Control 1</td> <td>72.8%</td> <td>72.6%</td> <td>-0.2 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 8.6 pct pts, p ≤0.05</b></p> <p>2. Completed Pap in past 2 years:</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 2</td> <td>68.5%</td> <td>74.5%</td> <td>6 pct pts</td> </tr> <tr> <td>Control 2</td> <td>69.2%</td> <td>78.7%</td> <td>9.5 pct pts</td> </tr> </tbody> </table> <p><b>Difference: -3.5 pct pts</b></p> <p>2. Completed Pap in past 2 years:</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>83.8%</td> <td>85.6%</td> <td>1.8 pct pts</td> </tr> <tr> <td>Control 1</td> <td>88.6%</td> <td>89.3%</td> <td>0.7 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 1.1 pct pts, p&gt;0.05</b></p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 2</td> <td>79.9%</td> <td>85.5%</td> <td>6.5 pct pts</td> </tr> <tr> <td>Control 2</td> <td>84.5%</td> <td>83.0%</td> <td>-1.5pct pts</td> </tr> </tbody> </table> <p><b>Difference: 8.0 pct pts, p ≤0.01</b></p>		Pre	Post	Change	Arm 1	65.9%	74.3%	8.4 pct pts	Control 1	72.8%	72.6%	-0.2 pct pts		Pre	Post	Change	Arm 2	68.5%	74.5%	6 pct pts	Control 2	69.2%	78.7%	9.5 pct pts		Pre	Post	Change	Arm 1	83.8%	85.6%	1.8 pct pts	Control 1	88.6%	89.3%	0.7 pct pts		Pre	Post	Change	Arm 2	79.9%	85.5%	6.5 pct pts	Control 2	84.5%	83.0%	-1.5pct pts
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<p><b>Author, Year:</b> Blumenthal 2010</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Georgia, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> January 2003 – April 2005</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: OE + SM Arm 2: GE + SM Arm 3: ROPC + RSB1 + RSB2 + SM Control: SM</p> <p>OE: health educator reviewed educational materials on CRC risk and screening to individuals GE: health educator reviewed educational materials on CRC risk and screening to groups of 4 to 14 SM: patients received logo gift bags containing cookbook, message fan, pamphlets, and CRC screening information ROPC: financial reimbursement up to \$500 for out-of-pocket expenses incurred for CRC screening (including transportation and other non-medical expenses) RSB1: assistance negotiating direct payment RSB2: assistance arranging transportation to clinic</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> African American patients over age 49 with no history of CRC and no previous CRC screening test within in the recommended time interval.</p> <p><b>Sample Size:</b> 645</p> <p><b>Attrition:</b> 59.8% (386/645)</p> <p><b>Demographics:</b> Age: mean age 68.3 Gender: 27.1% male; 72.9% female Race/Ethnicity: 100% African American Income: NR Education: 18.7% elementary; 46.3% HS or technical; 34.1% some college or more Insurance: 26.0% private; 62.6% public; 10.3% no insurance Foreign-born status: NR Co-morbidity: NR Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> Receipt of any CRC screening within 6 months</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Incremental effectiveness:</b> Arm 1: 17/98 = 17.3% Control: 11/88 = 12.5% <b>Difference: 4.8 pct pts, p is non-significant</b></p> <p>Arm 2: 22/99 = 22.2% Control: 11/88 = 12.5% <b>Difference: 9.7 pct pts, p=0.0817</b></p> <p>Arm 3: 14/84 = 16.7% Control: 11/88 = 12.5% <b>Difference: 4.2 pct pts, p is non-significant</b></p>

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<p><b>Author, Year:</b> Bowen 2010</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Pacific Northwest, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> NR</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: SM + OE + GE Control: usual care</p> <p>SM: printed material provided general information on BC risk and personalized risk information OE: telephone counseling to answer questions, check for adverse reactions to personal risk information, and offer opportunities for more intensive counseling GE: group counseling available to women expressing anxiety about their risk Usual care: received intervention after study was complete</p> <p><b>Presence of CHW/LHA/PN:</b> Other deliverer</p>	<p><b>Eligibility Criteria:</b> Women aged 18 to 74 who had not been previously diagnosed with BC, had a working telephone number and address, spoke English, planned to be in their current residence for at least 1 year, and were willing to complete the survey requirements for the baseline and follow-up assessment.</p> <p><b>Sample Size:</b> 1510</p> <p><b>Attrition:</b> 8%</p> <p><b>Demographics:</b> Age: 32% less than 40 years Gender: 100% female Race/Ethnicity: 85% White; 15% non-White Income: NR Education: 16% HS education only Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: 66-67%</p>	<p><b>Outcome Measure:</b> MAM in past year</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 1 year after intervention was implemented</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1 change: 15% Control change: 4% <b>Difference: 11 pct pts, p&lt;0.01</b></p>

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<p><b>Author, Year:</b> Braun 2005</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Hawaii, US</p> <p><b>Setting:</b> Community (Hawaiian civic clubs)</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> 2001- June 2003</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: GE1 + RSB + OE Arm 2: GE2 + RSB</p> <p>GE1: culturally targeted group education covering CRC screening by Native Hawaiian physician GE2: culturally targeted group education covering CRC screening by non-Hawaiian nurse RSB: free FOBT kits provided at civic clubs OE: multiple telephone calls aimed at addressing change-related emotions and barriers for those not UTD between 4 and 16 weeks post-GE1</p> <p><b>Presence of CHW/LHA/PN:</b> Clinical educator</p>	<p><b>Eligibility Criteria:</b> Civic club members aged 50 and older.</p> <p><b>Sample Size:</b> 131</p> <p><b>Attrition:</b> 7.6% (10/131)</p> <p><b>Demographics:</b> Age: mean age 65.7 Gender: 28.1% male; 71.9% female Race/Ethnicity: 90.1% Hawaii/Pacific Islander Income: NR Education: 10.7% &lt;HS; 28.1% HS; 25.6% some college; 19.8% college; 15.7% &gt;college Insurance: 61.2% private; 38.8% public Foreign-born status: NR Co-morbidity: NR Baseline screening: 63.4% UTD</p>	<p><b>Outcome Measure:</b> UTD with CRC screening at follow-up</p> <p><b>How Ascertained:</b> Self-report (pre-intervention) and returned FOBTs (post-intervention)</p> <p><b>Follow-up Time:</b> 4 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm 1</td> <td style="text-align: center;">41/69=59.4%</td> <td style="text-align: center;">46/69=66.7%</td> </tr> <tr> <td colspan="3"><b>Change: 7.2 pct pts (-8.8, 23.3)</b></td> </tr> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm 2</td> <td style="text-align: center;">36/52=69.2%</td> <td style="text-align: center;">44/52=84.6%</td> </tr> <tr> <td colspan="3"><b>Change: 15.4 pct pts (-0.5, 31.3)</b></td> </tr> </table>		Pre	Post	Arm 1	41/69=59.4%	46/69=66.7%	<b>Change: 7.2 pct pts (-8.8, 23.3)</b>				Pre	Post	Arm 2	36/52=69.2%	44/52=84.6%	<b>Change: 15.4 pct pts (-0.5, 31.3)</b>		
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<p><b>Author, Year:</b> Byrnes 2007</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Australia</p> <p><b>Setting:</b> Clinic</p> <p><b>Health System Factors:</b> Electronic database</p> <p><b>Intervention Duration:</b> July 2004 – December 2005</p> <p><b>Intervention Details:</b> Type of cancer addressed: cervical cancer</p> <p>Arm 1: CR + RSB</p> <p>CR: letter sent indicating screening status RSB: reduced administrative barriers by providing participants option to visit RN for screening only Pap</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Women aged 18 to 69 who had attended the practice within past 2 years, had not requested a records transfer to another practice and did not have an address outside of Bundaberd district. Excluded women with sub hysterectomy.</p> <p><b>Sample Size:</b> 1540</p> <p><b>Attrition:</b> 7.1% (109/1540)</p> <p><b>Demographics:</b> Age: range 18-69 Gender: 100% female Race/Ethnicity: NR Income: NR Education: NR Insurance: Universal health coverage Foreign-born status: NR Co-morbidity: NR Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> Completed MAM in past 2 years</p> <p><b>How Ascertained:</b> Chart views</p> <p><b>Follow-up Time:</b> 18 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1 Pre: 816/1540=53.0% Post: 966/1431=67.5% <b>Change: 14.5 pct pts, (11, 18)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results						
<p><b>Author, Year:</b> Cardarelli 2011</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Texas, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: GE + RSB</p> <p>GE: series of breast health education classes focusing on BC prevention using detailed multimodal educational materials RSB: mobile MAM unit provided screening to women receiving intervention</p> <p><b>Presence of CHW/LHA/PN:</b> Other deliverer</p>	<p><b>Eligibility Criteria:</b> Women aged 40 and older residing in specified geographic areas (intervention group participants resided in Frazier Courts community of South Dallas; control group participants resided in a West Dallas community with similar SES composition) who speak English and have no personal history of cancer.</p> <p><b>Sample Size:</b> 119</p> <p><b>Attrition:</b> 21.8% (26/119)</p> <p><b>Demographics:</b> Age: mean age 55.0 Gender: 100% female Race/Ethnicity: 100% African American Income: 58.0% &lt;\$10,000; 40.3% \$10,000-\$50,000; 1.7% &gt;\$50,000 Education: 33.6% &lt;HS; 40.4% HS diploma/GED; 22.7% some college; 3.4% ≥Bachelor’s degree Insurance: 78.2% insured Foreign-born status: NR Co-morbidity: NR Baseline screening: 52% MAM in prior year</p>	<p><b>Outcome Measure:</b> Receipt of MAM in previous year</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 2 months post-intervention completion</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm 1</td> <td style="text-align: center;">51%</td> <td style="text-align: center;">80%</td> </tr> </table> <p><b>Change: 29 pct pts (12.7, 45.3)</b></p>		Pre	Post	Arm 1	51%	80%
	Pre	Post							
Arm 1	51%	80%							

Study	Intervention Characteristics	Population Characteristics	Results												
<p><b>Author, Year:</b> Charters 2013</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Canada</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> Healthcare is publicly funded and all permanent residents are entitled to coverage under the OHIP.</p> <p><b>Intervention Duration:</b> March 2008</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (FOBT)</p> <p>Arm 1: MM + SM + RSB Control: usual care</p> <p>MM: public awareness campaign through television, websites, posters and street teams at public events SM: providers received information kits and counseling manuals; general public received pamphlets RSB: individuals without PCP can obtain FOBT kits from pharmacist or via calling a 1-800 number Usual care: NR</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Individuals aged 50 to 74 years at average risk of cancer, where average risk is defined as having no signs or symptoms of CRC and no affected first-degree family members. High risk individuals were removed from the sample, including those who reported screening with either FOBT or endoscopy due to family history of CRC, or as a follow-up to treatment of CRC, and those reporting bowel disease such as colitis or Crohn’s disease.</p> <p><b>Sample Size:</b> 58,142</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: 73.6% 50-64; 26.4% 65-74 Gender: 52.5% male; 47.5% female Race/Ethnicity: 88.3% White; 11.7% other Income: 17.8% in lowest quintile based on national composition (Q1); 19.1% Q2; 19.7% Q3; 19.5% Q4; 23.9% Q5 Education: 22.3% &lt;secondary; 17.8% secondary; 6.2% some post-secondary; 53.8% post-secondary Insurance: universal health insurance Foreign-born status: 64.8% non-immigrant Co-morbidity: 15% self-reported fair/poor health status; 41% BMI overweight Baseline screening: 8-14% FOBT in past year; 3-6% endoscopy in past year</p>	<p><b>Outcome Measure:</b> FOBT completion</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>15.7%</td> <td>21.9%</td> <td>6.2 pct pts</td> </tr> <tr> <td>Control</td> <td>12.4%</td> <td>10.6%</td> <td>-1.8 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 8 pct pts (7.1, 8.9)</b></p>		Pre	Post	Change	Arm 1	15.7%	21.9%	6.2 pct pts	Control	12.4%	10.6%	-1.8 pct pts
	Pre	Post	Change												
Arm 1	15.7%	21.9%	6.2 pct pts												
Control	12.4%	10.6%	-1.8 pct pts												

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Chaudhry 2007</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Minnesota, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> EMR/web system (PRECARES)</p> <p><b>Intervention Duration:</b> January 2004 – October 2004</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: CR + RSB Control: usual care</p> <p>CR: mailed letter inviting overdue patient to schedule MAM RSB: assistance with appointment scheduling Usual care: regular office visits</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Women aged 40 to 75 years who were patients of Primary Care Internal Medicine and were due for annual MAM in next 3 months. Excluded patients who were previously scheduled for or had refused MAM or who had undergone screening elsewhere.</p> <p><b>Sample Size:</b> 6665</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: range 40-75 Gender: 100% female Race/Ethnicity: NR Income: NR Education: NR Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: NR</p>	<p><b>Outcome Measure:</b> Completed MAM in past year</p> <p><b>How Ascertained:</b> Chart views</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 2137/3326 = 64.3% Control: 1847/3339 = 55.3% <b>Difference: 8.9 pct pts, p&lt;0.001</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Christie 2008</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> US</p> <p><b>Setting:</b> Community health department/clinic</p> <p><b>Health System Factors:</b> Inclusion criteria included having a PCP</p> <p><b>Intervention Duration:</b> June 2004 – October 2004</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (colonoscopy)</p> <p>Arm 1: RSB1 + RSB2 Arm 2: RSB1 + RSB2 + RSB3 + OE</p> <p>RSB1: assistance scheduling appointments RSB2: open access endoscopy system RSB3: organize and coordinate transportation OE: patient navigators provided tailored information on cancer risk, screening tests and barriers to screening</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Men and women aged 50 and older who were asymptomatic for GI symptoms, were in need of screening, had a PCP, and had received a referral for screening colonoscopy. Individuals who need screening are defined as those who have not had FOBT in past year, or FS in past 5 years, or colonoscopy in past 10 years.</p> <p><b>Sample Size:</b> 21</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: mean age 58 Gender: 25% male; 75% female Race/Ethnicity: 21% African American; 71% Hispanic; 8% other Income: 81% &lt;\$20,000; 19% &gt;\$20,000 Education: 71% &lt;HS; 29% &gt;HS Insurance: 36% public; 12% unspecified type of insurance; 52% uninsured Foreign-born status: NR Co-morbidity: NR Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> Completed colonoscopy at 3 months after enrollment</p> <p><b>How Ascertained:</b> Medical chart review</p> <p><b>Follow-up Time:</b> 3 months</p> <p><b>Results:</b> <b>Incremental effectiveness:</b> Arm 1: 13.0% Arm 2: 53.8% <b>Difference: 40.8 pct pts, p=0.085</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Coronado 2011</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Washington, US</p> <p><b>Setting:</b> Community clinic</p> <p><b>Health System Factors:</b> EMR</p> <p><b>Intervention Duration:</b> Assumed to be June 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (FOBT)</p> <p>Arm 1: RSB Arm 2: RSB + CR + OE Control: usual care</p> <p>RSB: mailed packet containing letter, FOBT card, pamphlet with FOBT instructions, and pre-stamped CR: telephone reminders by health promoters OE: home visits by Spanish-speaking health provider included use of educational materials Usual care: no formal prompting of CRC screening other than what is provided during physician visit</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Eligible clinics were community clinics that specialized in care for Hispanic patients. One clinic from Sea Mar Community Health Centers, which operates 11 health centers in western WA, was chosen. Hispanic patients aged 50 to 79 years who had been seen in the chosen community clinic during eligibility period, were drawn from computerized clinic records system, and were non-compliant with CRC screening guidelines. Excluded patients with a colonoscopy or sigmoidoscopy within 5 years or FOBT before 1/1/2006.</p> <p><b>Sample Size:</b> 501</p> <p><b>Attrition:</b> 7.8% (39/501)</p> <p><b>Demographics:</b> Age: 51.0% 50-59; 33.0% 60-69; 9.9% 70-79 Gender: 47.1% male; 52.9% female Race/Ethnicity: 100% Hispanic Income: Low-income Education: NR Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> Received FOBT screening</p> <p><b>How Ascertained:</b> Medical records</p> <p><b>Follow-up Time:</b> 9 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 2: 52/168 = 31.0% Control: 4/165 = 2.4% <b>Difference: 28.5 pct pts, p&lt;0.0014</b></p> <p><b>Incremental effectiveness:</b> Arm 1: 43/168 = 25.6% Arm 2: 52/168 = 31.0% <b>Difference: 5.4 pct pts, p=0.28</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Danigelis 2005</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Florida, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> 1990-1997</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: GE + OE + ROPC Control: usual care</p> <p>GE: small group education sessions covering screening guidelines OE: content same as GE but was tailored to advise screening within context of personal experiences, potential barriers, and familiarity with local screening services ROPC: provided access to BC screening and treatment to low-income women in county Usual care: no intervention in comparison county</p> <p><b>Presence of CHW/LHA/PN:</b> Other deliverer</p>	<p><b>Eligibility Criteria:</b> Women aged 40 and older residing in selected areas.</p> <p><b>Sample Size:</b> NR</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: 100% ≥40 Gender: 100% female Race/Ethnicity: 92% African American (1990); 89% African American (1997) Income: NR but intervention conducted in low-income counties Education: NR Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: 45-69% had MAM in prior 2 years and at least 1 previously if aged ≥50</p>	<p><b>Outcome Measure:</b> Recent or repeat MAM within prior 2 years and at least 1 previously if aged ≥50</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Adjusted OR of intervention area adjusted for relevant background and mediating factors: 1990: 0.69 (0.41, 1.17) 1997: 1.00 (0.70, 1.44)</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Decker 2013</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Canada</p> <p><b>Setting:</b> Community and clinic</p> <p><b>Health System Factors:</b> Pap tests are electronically submitted daily to registry by all Manitoba cytology laboratories.</p> <p><b>Intervention Duration:</b> Unclear</p> <p><b>Intervention Details:</b> Type of cancer addressed: cervical cancer</p> <p>Arm 1: CR + RSB Control: usual care</p> <p>CR: mailed invitation letter stating screening status and brochure providing information on program and Pap RSB: dedicated staff and time to perform Pap tests either by appointment or walk-in basis Usual care: NR</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Unscreened women aged 30 to 69 years at the date of invitation letter who had no prior invasive gynecological cancer diagnosis or complete hysterectomy, were covered by provincial health care insurance, and had not had mail returned to Manitoba Health.</p> <p><b>Sample Size:</b> 31,452</p> <p><b>Attrition:</b> 2.1% control; 4.7% intervention</p> <p><b>Demographics:</b> Age: 17.7% 30-39; 26.0% 40-49; 28.6% 50-59; 27.7% 60-69 Gender: 100% female Race/Ethnicity: NR Income: (Can\$) 24.6% &lt;\$40,000; 39.3% \$40,000-&lt;\$60,000; 36.0% ≥\$60,000 Education: 4.9% low (&lt;50%HS); 26.8% moderate (50-74%HS); 68.1% high (≥75%HS) Insurance: 100% public Foreign-born status: immigration status 42.2% very low (&lt;10%); 57.7% low (≥10%) Co-morbidity: NR but Resource Utilization Band reported Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> Uptake of Pap test</p> <p><b>How Ascertained:</b> Screening registry</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 1010/17068 = 5.9% Control: 441/14384 = 3.1% <b>Difference: 2.9 pct pts (2.4, 3.3)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results																														
<p><b>Author, Year:</b> Dietrich 2006</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> New York, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> November 2001 – April 2004</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast, cervical and colorectal cancer (any test)</p> <p>Arm 1: SM Arm 2: SM + OE + RSB1 + RSB2</p> <p>SM: women received publication titled “Put Prevention into Practice: Personal Health Guide” OE: trained prevention care manager provided information on screenings and barriers to care RSB1: assistance with appointment scheduling RSB2: transportation assistance</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Women aged 50 to 69 years who were overdue for at least 1 cancer screening according to medical records, were patients of the center for at least 6 months, and had no plans to move or change health centers within 15 months. Excluded women whose primary language was not English, Spanish, or Haitian Creole, those who were acutely ill or currently receiving cancer treatment, and those whose charts indicated they were UTD on all 3 cancer screening. Excluded women with unresolved abnormal screening results and notified their physicians.</p> <p><b>Sample Size:</b> 1413</p> <p><b>Attrition:</b> 1.6% (23/1413)</p> <p><b>Demographics:</b> Age: mean age 58.1 Gender: 100% female Race/Ethnicity: proportions unknown Income: 34% &lt;\$25,000; 39% \$25,000-40,000; 27% &gt;\$40,000 Education: NR Insurance: 9.4% private; 78.8% Medicaid; 20% Medicare; 5.2% none; 1.4% unknown Foreign-born status: NR Co-morbidity: 30.7% asthma, 70.9% hypertension, 39.6% hyperlipidemia; 37.8% diabetes Baseline screening: 59.0% breast cancer; 70.5% cervical cancer; 39.0% colorectal cancer</p>	<p><b>Outcome Measure:</b> 1. Completed MAM 2. Completed Pap 3. Completed any CRC test</p> <p><b>How Ascertained:</b> Chart views</p> <p><b>Follow-up Time:</b> 18 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <p>1. Completed MAM</p> <table border="0"> <tr> <td></td> <td>Pre</td> <td>Post</td> </tr> <tr> <td>Arm 2</td> <td>58%</td> <td>68%</td> </tr> </table> <p><b>Change: 10 pct pts, (5.0, 15.0)</b></p> <p>2. Completed Pap</p> <table border="0"> <tr> <td></td> <td>Pre</td> <td>Post</td> </tr> <tr> <td>Arm 2</td> <td>71%</td> <td>78%</td> </tr> </table> <p><b>Change: 7 pct pts, (3.0, 11.0)</b></p> <p>3. Completed any CRC test</p> <table border="0"> <tr> <td></td> <td>Pre</td> <td>Post</td> </tr> <tr> <td>Arm 2</td> <td>39%</td> <td>63%</td> </tr> </table> <p><b>Change: 24 pct pts, (20.0, 29.0)</b></p> <p><b>Incremental effectiveness:</b></p> <table border="0"> <tr> <td></td> <td>Pre</td> <td>Post</td> <td>Change</td> </tr> <tr> <td>Arm 1</td> <td>60%</td> <td>58%</td> <td>-2 pct pts</td> </tr> <tr> <td>Arm 2</td> <td>58%</td> <td>68%</td> <td>10 pct pts</td> </tr> </table> <p><b>Difference: 12 pct pts, p&lt;0.05</b></p>		Pre	Post	Arm 2	58%	68%		Pre	Post	Arm 2	71%	78%		Pre	Post	Arm 2	39%	63%		Pre	Post	Change	Arm 1	60%	58%	-2 pct pts	Arm 2	58%	68%	10 pct pts
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Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Dietrich 2007</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> New York, US</p> <p><b>Setting:</b> Community health centers</p> <p><b>Health System Factors:</b> Community health centers with high number of Medicaid MCO patients</p> <p><b>Intervention Duration:</b> May – December 2005</p> <p><b>Intervention Details:</b> Type of cancer addressed: cervical and colorectal cancer (any test)</p> <p>Arm 1: OE + RSB</p> <p>OE: pre-existing outreach specialist expanded calls to include information on screening tests and barriers to screening RSB: assistance with appointment scheduling</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Women aged 40 to 69 years who received care from 1 of 6 participating community health centers, had been enrolled with Affinity (a pre-existing clinical outreach program for BC screening) for at least 12 months, and were overdue for at least 1 of the targeted cancer-screening test.</p> <p><b>Sample Size:</b> 1316</p> <p><b>Attrition:</b> 59% (777/1316)</p> <p><b>Demographics:</b> Age: mean age 50.2 (CC); range 50-69 (CRC) Gender: 100% female Race/Ethnicity: NR Income: NR but health centers served low and moderate-income populations Education: NR Insurance: 100% public Foreign-born status: NR Co-morbidity: NR Baseline screening: participants had to be overdue for at least 1 cancer screening test</p>	<p><b>Outcome Measure:</b> 1. Completed PAP within past 3 years 2. Any CRC screening</p> <p><b>How Ascertained:</b> Record in administrative database for Affinity clinical outreach program</p> <p><b>Follow-up Time:</b> 10 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. Completed PAP within past 3 years</p> <p>Arm 1 Pre: 344/663 = 51.9% Post: 423/663 = 63.8% <b>Change: 11.9 pct pts, (6.6, 17.2)</b></p> <p>2. Any CRC screening</p> <p>Arm 1 Pre: 56/317 = 17.7% Post: 103/317 = 32.5% <b>Change: 14.8 pct pts, (8.2, 21.5)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Dietrich 2013</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> New York, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> Administrative and claims data; Medicaid MCOs including CHCs</p> <p><b>Intervention Duration:</b> December 2008 – July 2009</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test, colonoscopy, FOBT)</p> <p>Arm 1: CR + OE + PR Control: usual care</p> <p>CR: mailed personalized letter listing overdue screenings and educational materials OE: telephone outreach addressed barriers PR: participants received card listing overdue screenings to share with provider Usual care: random subsample received call during which they confirmed screening dates, provided demographic information and were advised to follow-up with provider</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Women who spoke English, Spanish, or Russian as their primary language, were aged 50 to 63 years, were continuously enrolled with a participating MMCO for at least 12 months, and were assigned to a participating practice. Excluded women UTD for CRC screening according to USPSTF recommendations or with claims indicating history of CRC, recent active cancer treatment, or a recent BC, CC or lung cancer diagnosis.</p> <p><b>Sample Size:</b> 2240</p> <p><b>Attrition:</b> 27%</p> <p><b>Demographics:</b> Age: mean age 55.8 Gender: 100% female Race/Ethnicity: NR Income: NR Education: NR Insurance: 100% public Foreign-born status: NR Co-morbidity: 29.0% diabetes, 60.8% hypertension, 37.5% high cholesterol level Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b></p> <ol style="list-style-type: none"> <li>1. UTD on CRC screening following 2008 USPSTF recommendations</li> <li>2. UTD on colonoscopy</li> <li>3. UTD with FOBT</li> </ol> <p><b>How Ascertained:</b> MMCO claims data</p> <p><b>Follow-up Time:</b> 18 months</p> <p><b>Results:</b></p> <p><b>Absolute effectiveness:</b></p> <ol style="list-style-type: none"> <li>1. UTD on CRC screening following 2008 USPSTF recommendations Arm 1: 206/562 = 36.7% Control: 514/1678 = 30.6% <b>Difference: 6.0 pct pts, p&lt;0.01</b></li> <li>2. UTD on colonoscopy Arm 1: 26.3% Control: 20.3% <b>Difference: 6.0 pct pts, (1.9, 10.1)</b></li> <li>3. UTD with FOBT Arm 1: 12.5% Control: 12.2% <b>Difference: 0.3 pct pts, (-2.9, 3.5)</b></li> </ol>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Elkin 2012</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> New York, US</p> <p><b>Setting:</b> Clinical and community</p> <p><b>Health System Factors:</b> Access to records from NYC Department of Health and Mental Hygiene and the Health and Hospitals Cooperation</p> <p><b>Intervention Duration:</b> 2005 to 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: Colorectal cancer (colonoscopy)</p> <p>Arm 1: RSB1 + RSB2 Control: usual care</p> <p>RSB1: assistance with paperwork RSB2: assistance with appointment scheduling Usual Care: comparison hospitals did not implement navigator program</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Men and women of average risk aged 50 and above. All patients with an appointment for colonoscopy were identified in clinic schedules.</p> <p><b>Sample Size:</b> 44326</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: 13.3% &lt;50; 59.5% 50-64; 27.2% ≥65 Gender: 39.3% male; 60.7% female Race/Ethnicity: 4.0% White; 26.8% African American; 8.1% Asian, 58.4% Hispanic; 5.0% other Income: NR Education: 23.7% lived in zip code where &gt;50% graduated HS; 76.3% lived in zip code where &gt;50% did not graduate HS Insurance: 81.1% insured; 18.9% uninsured Foreign-born status: NR Co-morbidity: NR Baseline screening: 75% intervention; 85% control</p>	<p><b>Outcome Measure:</b> Probability of colonoscopy completion</p> <p><b>How Ascertained:</b> DOHMH and HHC records</p> <p><b>Follow-up Time:</b> 17 months to 4 years depending on site</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> In <i>adjusted</i> analysis, intervention was associated with an increase in the probability of colonoscopy completion of approximately 20 percentage points (p&lt;0.0001).</p>

Study	Intervention Characteristics	Population Characteristics	Results												
<p><b>Author, Year:</b> Fang 2007</p> <p><b>Study Design:</b> Individual NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> US</p> <p><b>Setting:</b> Clinical and community</p> <p><b>Health System Factors:</b> 59.6% of intervention group and 80.0% of controls reported having a regular doctor at baseline</p> <p><b>Intervention Duration:</b> August – October 2004</p> <p><b>Intervention Details:</b> Type of cancer addressed: cervical cancer</p> <p>Arm 1: GE + RSB1 + RSB2 + RSB3 Control: general health education</p> <p>GE: trained Korean health educators provided information on cervical cancer screening during 2 hour session RSB1: assistance with appointment scheduling RSB2: assistance with registration and paperwork for screening RBS3: translation services General health education: GE about general health and cancer screening</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Korean women were enrolled from 2 Korean, non-faith based, sociocultural community organizations that offer social services and senior programs and serve a predominantly low-income, uninsured, and recent immigrant population. Excluded women less than 18 years of age, those with a current diagnosis of CC, and those who had a Pap test within past 6 months.</p> <p><b>Sample Size:</b> 102</p> <p><b>Attrition:</b> 0%</p> <p><b>Demographics:</b> Age: mean age 55.5 Gender: 100% female Race/Ethnicity: 100% Korean Income: NR although community centers serve a predominantly low-income, uninsured population Education: 25.7% &lt;HS; 32.1% HS; 40.3% &gt;HS Insurance: 59.8% insured; 40.2% uninsured Foreign-born status: 100% foreign born Co-morbidity: NR Baseline screening: 83.3% not UTD in past year; 60.8% no Pap in past 3 years</p>	<p><b>Outcome Measure:</b> Completed Pap</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b></p> <p><b>Absolute effectiveness:</b></p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>11.5%</td> <td>82.7%</td> <td>71.2 pct pts</td> </tr> <tr> <td>Control</td> <td>22.0%</td> <td>22.0%</td> <td>0.0 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 71.2 pct pts, (55.7, 86.6)</b></p>		Pre	Post	Change	Arm 1	11.5%	82.7%	71.2 pct pts	Control	22.0%	22.0%	0.0 pct pts
	Pre	Post	Change												
Arm 1	11.5%	82.7%	71.2 pct pts												
Control	22.0%	22.0%	0.0 pct pts												

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Fernandez 2009</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> New Mexico &amp; Texas, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> Community and Migrant Health Center with LWH program</p> <p><b>Intervention Duration:</b> Implemented in 2004</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and cervical cancer</p> <p>Arm 1: OE + RSB1 + RSB2 + ROPC Control: usual care</p> <p>OE: lay health workers had home visits with participants RSB1: appointment scheduling assistance RSB2: transportation assistance ROPC: enhanced clinic resources to provide low-cost screening services Usual care: NR</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> 2 communities along US-Mexico border and 2 located in the Central Valley of California were selected based on the existence of a Community and Migrant Health Center with a LHW program, a high percentage of farmworker women aged 50 and older, no active breast or cervical cancer education programs, and the existence of an NBCCEDP screening site within 20 miles of health center.</p> <p>Women aged 50 and older with no prior or current cancer diagnosis who have either personal or family participation in farm work for 5 or more years and are non-adherent to BC or CC screening recommendations.</p> <p><b>Sample Size:</b> 497</p> <p><b>Attrition:</b> 32.5%</p> <p><b>Demographics:</b> Age: 47.1% 50-59; 26.2% 60-60; 26.7% ≥70 Gender: 100% female Race/Ethnicity: 100% Hispanic Income: low-income Education: 9% 0 years; 46% 1-5 years; 33.7% 6-11 years; 8.3% ≥12 years Insurance: 55% insured; 45% uninsured Foreign-born status: 20.5% born in US Co-morbidity: NR Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> 1. Completed MAM 2. Completed Pap</p> <p><b>How Ascertained:</b> Self-report with medical record review for validity</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. Completed MAM Arm 1: 53/207 = 25.6% Control: 53/257 = 20.6% <b>Difference: 5.0 pct pts, p=0.278</b> 2. Completed Pap Arm 1: 32/132 = 24.2% Control: 21/111 = 18.9% <b>Difference: 5.3 pct pts, p=0.193</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Ferreira 2005</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Illinois, US</p> <p><b>Setting:</b> VA Medical Center</p> <p><b>Health System Factors:</b> EMR</p> <p><b>Intervention Duration:</b> May 2001 – June 2003</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test, FOBT, flexible sigmoidoscopy/colonoscopy)</p> <p>Arm 1: SM + PAF Control: usual care</p> <p>SM: brochures providing basic instructions for FOBT kit and short video addressing barriers to care PAF: study team provided feedback every 4-6 on recommendation rates and patient adherence to recommendations Usual care: Computerized clinical reminder systems including reminder for FOBT</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Clinics had health care providers in two participating VA outpatient firms. Participants were male veterans who were aged 50 and older, were scheduled to be seen for a new or ongoing health problem by one of the identified providers, and were at average risk for CRC. Excluded those that had a personal or family history of CRC or polyps, a personal history of IBD, or if they had a home FOBT in past year or flex sig or colonoscopy in past 5 years.</p> <p><b>Sample Size:</b> 1978</p> <p><b>Attrition:</b> 0%</p> <p><b>Demographics:</b> Age: mean age 67.8 Gender: 100% male Race/Ethnicity: 45.1% White; 50.3% African American; 4.7% other Income: NR Education: NR Insurance: VA patients only Foreign-born status: NR Co-morbidity: NR Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> 1. Completion of any CRC screening test 2. Completion of FOBT 3. Completion of flex sig or colonoscopy</p> <p><b>How Ascertained:</b> Chart views</p> <p><b>Follow-up Time:</b> 18 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. Completion of any CRC screening test Arm 1: 41.3% Control: 32.4% <b>Difference: 8.9 pct pts, p=0.003</b></p> <p>2. Completion of FOBT Arm 1: 22.6% Control: 14.3% <b>Difference: 8.3 pct pts (4.9, 11.7)</b></p> <p>3. Completion of flex sig or colonoscopy Arm 1: 12.2% Control: 15.3% <b>Difference: -3.1 pct pts (-6.1, -0.1)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Fiscella 2011</p> <p><b>Study Design:</b> Individual NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> New York, US</p> <p><b>Setting:</b> Large family medicine safety-net practice</p> <p><b>Health System Factors:</b> EMR</p> <p><b>Intervention Duration:</b> September 2008 – March 2010</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and colorectal cancer (any test)</p> <p>Arm 1: CR + RSB + PR Control: usual care</p> <p>CR: mailed personalized letter indicating patient is overdue for screening; patient prompt sheet provided at clinic visit RSB: mailed FOBT kits to patients overdue for CRC screening PR: clinician prompt sheet provided at clinic visit Usual care: EMR allows prompts (however, prompts seldom used)</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Participants aged 40 to 75 years (BC) or 50 to 75 years (CRC) who were past due for either BC (&gt;18 months from last MAM) or CRC screening (&gt;12 months from last FOBT, &gt;5 years from last flex sig, &gt;10 years from last colonoscopy). Excluded those with no clinic visit in past 2 years and those with high risk for BC or CRC based on personal or family history.</p> <p><b>Sample Size:</b> 469</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: 62.6% 50-59, 37.5% ≥60 (CRC); 38.8% 40-49, 40.6% 50-59, 20.6% ≥60 (BC) Gender: 43.7% male, 56.3% female (CRC); 100% female (BC) Race/Ethnicity: 64.3% White, 24.8% African American, 11.0% other (CRC); 60.8% White, 29.5% African American, 9.7% other (BC) Income: 22.6% &lt;\$30,000, 40.9% \$30,000-\$39,000, 36.6% &gt;\$40,000 (CRC); 22.5% &lt;\$30,000, 41.0% \$30,000-\$39,000, 36.5% &gt;\$40,000 (BC) Education: NR Insurance: 41.8% private, 47.8% public, 10.3% uninsured (CRC); 37.8% private, 51.5% public, 10.7% uninsured (BC) Foreign-born status: NR Co-morbidity: NR Baseline screening: not UTD</p>	<p><b>Outcome Measure:</b> 1. Completed MAM 2. Completed CRC screening</p> <p><b>How Ascertained:</b> EMR documentation</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. Completed MAM Arm 1: 41.0% Control: 16.8% <b>Difference: 24.2 pct pts (13.8, 34.6)</b></p> <p>2. Completed CRC screening Arm 1: 28.8% Control: 10.0% <b>Difference: 18.8 pct pts (10.4, 27.2)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Flight 2012</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Australia</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> August 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (FOBT)</p> <p>Arm 1: RSB Arm 2: SM1 + RSB Arm 3: SM2 + RSB</p> <p>RSB: mailed FOBT kits to those who requested one SM1: education materials (booklet or web content) tailored to baseline survey responses SM2: generic education materials</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Participants aged 50 to 76 years. Ineligible if had regular CRC screening or had ever been diagnosed with CRC or bowel polyps. Intervention groups required to have experience using computer to search web and be willing to attend the CSIRO lab.</p> <p><b>Sample Size:</b> 119</p> <p><b>Attrition:</b> 12.6% (15/119)</p> <p><b>Demographics:</b> Age: mean age 60.8 Gender: 50.0% male; 50.0% female Race/Ethnicity: NR Income: NR Education: 32.7% some HS; 33.7% HS or trade school; 33.7% university Insurance: Universal coverage Foreign-born status: 20.2% foreign-born Co-morbidity: NR Baseline screening: ineligible if having regular CRC screening (not defined)</p>	<p><b>Outcome Measure:</b> FOBT uptake (receipt of completed FOBT)</p> <p><b>How Ascertained:</b> Returned FOBT kits</p> <p><b>Follow-up Time:</b> 3 months</p> <p><b>Results:</b> <b>Incremental effectiveness:</b> adding SM Arm 1: 5/20 = 25.0% Arm 2: 22/42 = 52.4% <b>Difference: 27.4 pct pts (3.1, 51.6)</b></p> <p>Arm 1: 5/20 = 25.0% Arm 3: 14/42 = 33.3% <b>Difference: 8.3 pct pts (-15.4, 32.1)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Ford 2006</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Michigan, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> 1999 – 2001</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (flex sig)</p> <p>Arm 1: RSB1 + RSB2 + RSB3 Control: usual care</p> <p>RSB1: assistance with appointment scheduling RSB2: provided transportation when requested RSB3: assistance accessing various agencies providing a range of services (financial assistance, medical assistance, legal aid, etc.) Usual care: usual PLCO Cancer Screening Trial procedures, which included annual calls for scheduling annual screening exams</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> African American men aged 55 to 74 years who were enrolled in intervention arm of the PLCO Cancer Screening Trial at the Henry Ford Health System site in Detroit, MI in 1999.</p> <p><b>Sample Size:</b> 703</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: 100% male Gender: mean age 63.2 Race/Ethnicity: 100% African American Income: 29.4% low income; 66.4% moderate to high income Education: 5.1% &lt;8 years; 19.8% 8-11 years; 21.8% HS; 9.1% post-HS training; 25.2% some college; 7.7% college; 11.0% postgraduate Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: all were in PLCO screening trial</p>	<p><b>Outcome Measure:</b> Completed next schedule flex sig during the PLCO cancer screening trial scheduled for year 5 (separated by income levels)</p> <p><b>How Ascertained:</b> PLCO trial records</p> <p><b>Follow-up Time:</b> 36 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Low income: Arm 1: 68.9% Control: 51.3% <b>Difference: 17.6 pct pts, p=0.10</b></p> <p>Moderate to high income: Arm 1: 53.8% Control: 62.5% <b>Difference: -8.7 pct pts, p=0.22</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Fouad 2010</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Alabama, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> January 2001 – November 2005 (Follow-up 2007)</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: RSB + OE</p> <p>RSB: assistance with appointment scheduling OE: community health advisors discussed barriers prior to appointments</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> African American women aged 40 years and older who were willing to give consent, were able to read and write, and were residents of a target county.</p> <p><b>Sample Size:</b> 2333</p> <p><b>Attrition:</b> 35.1% (820/2333)</p> <p><b>Demographics:</b> Age: ≥40 Gender: 100% female Race/Ethnicity: 100% African American Income: 54.5% employed Education: 35.6% HS diploma/GED Insurance: 36.7% private; 28.5% public Foreign-born status: NR Co-morbidity: NR Baseline screening: 67.0%</p>	<p><b>Outcome Measure:</b> Completed MAM in past year</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 24 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <p>Arm 1 Pre: 1055/2333 = 45.2% Post: 1146/2333 = 49.1% <b>Change: 3.9 pct pts (1.0, 6.8)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results												
<p><b>Author, Year:</b> Gellert 2006</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Hawaii, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> October 2003 (year-long project; community day event held in October 2003)</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and colorectal cancer (any test)</p> <p>Arm 1: GE + OE + RSB1 + RSB2 + RSB3 + RSB4</p> <p>GE: physicians provided basic cancer education sessions emphasizing early detection and treatment OE: same sex physician provided cancer education RSB1: assistance with appointment scheduling RSB2: administrative assistance with obtaining health insurance RSB3: provided FOBT at site RSB4: transportation assistance was provided</p> <p><b>Presence of CHW/LHA/PN:</b> Clinical educator</p>	<p><b>Eligibility Criteria:</b> Individuals living in the predominantly Native Hawaiian community on Molokai.</p> <p><b>Sample Size:</b> 73</p> <p><b>Attrition:</b> 0%</p> <p><b>Demographics:</b> Age: ≥40 (BC); ≥50 (CRC) Gender: NR Race/Ethnicity: 2.8% White; 11.0% Asian; 86.3% Native Hawaiian Income: NR Education: NR Insurance: 15% uninsured Foreign-born status: NR Co-morbidity: NR Baseline screening: 65.8% not UTD (BC); 37.7% UTD (CRC)</p>	<p><b>Outcome Measure:</b> 1. Completed MAM post intervention among women ≥40 2. Completed CRC screening (FOBT, flex sig, colonoscopy) among men and women ≥50</p> <p><b>How Ascertained:</b> NR</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. Completed MAM post intervention among women ≥40</p> <table border="0" style="width: 100%;"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm 1</td> <td style="text-align: center;">25/38=65.8%</td> <td style="text-align: center;">32/38=84.2%</td> </tr> </table> <p><b>Change: 18.4 pct pts, p=0.02</b></p> <p>2. Completed CRC screening (FOBT, flex sig, colonoscopy) among men and women ≥50</p> <table border="0" style="width: 100%;"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm 1</td> <td style="text-align: center;">20/53=37.7%</td> <td style="text-align: center;">40/53=75.5%</td> </tr> </table> <p><b>Change: 37.7 pct pts, p=0.002</b></p>		Pre	Post	Arm 1	25/38=65.8%	32/38=84.2%		Pre	Post	Arm 1	20/53=37.7%	40/53=75.5%
	Pre	Post													
Arm 1	25/38=65.8%	32/38=84.2%													
	Pre	Post													
Arm 1	20/53=37.7%	40/53=75.5%													

<p><b>Author, Year:</b> Green et al., 2013</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Idaho &amp; Washington, US</p> <p><b>Setting:</b> Primary care clinics</p> <p><b>Health System Factors:</b> EHR</p> <p><b>Intervention Duration:</b> Fall 2009 - 2011</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test, FOBT, colonoscopy, flex sig)</p> <p>Arm 1: PR + CR1 + RSB1 (for non-responders) Arm 2: Arm 1 + RSB1 (for everyone as they become due) + CR2 (SM, f/u CR) Arm 3: Arm 2 + OE1 Arm 4: Arm 3 + OE2 + RSB2</p> <p>PR: Medical assistants (MAs) or nurses completed a form before visits to identify unmet immunization, chronic condition and prevention needs; forms given to MD CR1: letter sent to patients to identify unmet needs RSB1: mailed FOBT kits CR2: patients received a letter to remind them of screening, with pamphlet on CRC screening OE1: patients received automated support and telephone assistance from MA to complete screening OE2: RNs contacted patients who preferred colonoscopy or sig, needed assistance making choice, intended to do FOBT but had no FOBT results after 3 weeks, or could not be contacted by MA RSB2: patients received RN navigation</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Patients aged 50-73yrs from 21 primary care clinics of Group Health Cooperative, not current for CRC screening. Excluded previous CRC or active treatment for another cancer, IBD, or serious chronic or life-threatening disease.</p> <p><b>Sample Size:</b> 4664</p> <p><b>Attrition:</b> 8.4%</p> <p><b>Demographics:</b> Age: 50-64: 3975 (85.2%); 65-73: 689 (14.8%) Gender: 20.4 female Race/Ethnicity: 80.6% White; 4.9% AA; 5.1% Asian; 6.1% other; 3.3% Hispanic Income: NR Education: 15.0% ≤HS Insurance: 100% insured (All MCO) Foreign-born status: NR Co-morbidity: General Health - Excellent/very good: 2935 (62.9%); Good: 1391 (29.8%); Fair/poor: 332 (7.1%) Baseline screening: not up to date</p>	<p><b>Outcome Measure:</b> 1. Any test completed in either Y1 or Y2 2. FOBT completed in either Y1 or Y2 3. Colonoscopy completed in either Y1 or Y2 4. Flex sig completed in either Y1 or Y2</p> <p><b>How Ascertained:</b> EHR or claims data</p> <p><b>Follow-up Time:</b> 24 months</p> <p><b>Results:</b> <b>Incremental Effects:</b> 1. Any test completed in either Y1 or Y2 Arm 2: NR/1159 = 77.9% Arm 1: NR/1169 = 72.5% <b>Difference: 5.4 pct pts (2.2, 8.6)</b></p> <p>Arm 3: NR/1170 = 82.6% Arm 1: NR/1169 = 72.5% <b>Difference: 10.1 pct pts (6.7, 13.5)</b></p> <p>2. FOBT completed in either Y1 or Y2 Arm 2: NR/1159 = 67.2% Arm 1: NR/1169 = 64.0% <b>Difference: 3.2 pct pts (-1.1, 7.4)</b></p> <p>Arm 3: NR/1170 = 71.2% Arm 1: NR/1169 = 64.0% <b>Difference: 7.2 pct pts (3.4, 10.98)</b></p> <p>3. Colonoscopy completed in either Y1 or Y2 Arm 2: NR/1159 = 23.0% Arm 1: NR/1169 = 20.7% <b>Difference: 2.3 pct pts (-1.6, 6.1)</b></p> <p>Arm 3: NR/1170 = 25.6% Arm 1: NR/1169 = 20.7% <b>Difference: 4.9 pct pts (1.5, 8.3)</b></p> <p>4. Flex sig completed in either Y1 or Y2 Arm 2: NR/1159 = 6.5% Arm 1: NR/1169 = 5.1%</p>
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Study	Intervention Characteristics	Population Characteristics	Results						
			<p><b>Difference: 1.4 pct pts (0, 2.9)</b></p> <p>Arm 3: NR/1170 = 5.5%</p> <p>Arm 1: NR/1169 = 5.1%</p> <p><b>Difference: 0.4 pct pts (-1.4, 2.2)</b></p>						
<p><b>Author, Year:</b> Greiner et al., 2013</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Kansas, US</p> <p><b>Setting:</b> Community health center</p> <p><b>Health System Factors:</b> Participants recruited from large FQHC</p> <p><b>Intervention Duration:</b> Nov 2002 - Feb 2003</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (FOBT)</p> <p>Arm 1: OE(SM) + ROPC(RSB)</p> <p>OE: 5-min educational script on CRC screening methods was read to participants SM: educational script about the pros and cons of three CRC screening tests ROPC: a free FOBT screening test and a postage-paid return envelope RSB: admin barrier</p> <p><b>Presence of CHW/LHA/PN:</b> Other deliverer</p>	<p><b>Eligibility Criteria:</b> Adults 40+ years visiting health center who were without acute illness or apparent cognitive deficit at time of interview</p> <p><b>Sample Size:</b> 293</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: median of 48 Gender: 50.9% female Race/Ethnicity: 21.84% White; 69.28% AA; 6.83% Other Income: Monthly income &lt;\$1200: 70.6% ≥\$1200: 26.6% (low-income) Education: &lt;HS 28.3% Insurance: Insured (public) = 55.6% (45.1%) Foreign-born status: NR Co-morbidity: NR Baseline screening: 20.4%</p>	<p><b>Outcome Measure:</b> Completed FOBT among men and women aged ≥50</p> <p><b>How Ascertained:</b> NR</p> <p><b>Follow-up Time:</b> 3 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm 1</td> <td style="text-align: center;">7.40%</td> <td style="text-align: center;">80/293=27.3%</td> </tr> </table> <p><b>Change: 19.9 pct pts (14.0, 25.8)</b></p>		Pre	Post	Arm 1	7.40%	80/293=27.3%
	Pre	Post							
Arm 1	7.40%	80/293=27.3%							

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Hannon et al., 2013</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Washington, US</p> <p><b>Setting:</b> Worksite</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> 2006</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any, colonoscopy, FOBT, flex sig)</p> <p>Arm1: GE + RSB (ROPC,CR) Control: Usual care</p> <p>GE: worksites offered one or more physician-led seminars RSB: worksite access ROPC: worksites provided free FIT kits to employees CR: Staff sent reminder letters and conducted telephone calls to reach employees who took FIT kits but did not return them after 2 weeks.</p> <p><b>Presence of CHW/LHA/PN:</b> Clinical educator</p>	<p><b>Eligibility Criteria:</b> Worksites were eligible for the program if they (a) were located in Spokane County and employed primarily Spokane County residents, (b) were willing to share de-identified data from the SRHD health risk assessment, and (c) were interested in receiving the program. Worksite previously participated in a free online health risk assessment. Employees were aged 50+.</p> <p><b>Sample Size:</b> 13 worksites participated; 6 intervention sites with 1054 employees</p> <p><b>Attrition:</b> 5 of 6 intervention sites completed the program</p> <p><b>Demographics:</b> Age: 50+ Gender: 61.0% female Race/Ethnicity: 94% White; 2% AA; 2% Asian Income: NR Education: NR Insurance: 84% insured (other) Foreign-born status: NR Co-morbidity: NR Baseline screening: NR</p>	<p><b>Outcome Measure:</b> 1. UTD with any CRC test 2. FOBT in past year 3. FS in past 5 years 4. CS in past 10 years</p> <p><b>How Ascertained:</b> Self-report using HSAS (free, online health risk assessment); FIT kit return</p> <p><b>Follow-up Time:</b> 3 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. UTD with any CRC test Arm 1: 95/503 = 71.2% Control: 408/503 = 54.2% <b>Difference: 17 pct pts (6.7, 27.3)</b> 2. FOBT in past year Arm 1: 95/503 = 40.0% Control: 408/503 = 15.0% <b>Difference: 25 pct pts (14.6, 35.4)</b> 3. FS in past 5 years Arm1: 95/503 = 12.6% Control: 408/503 = 13.7% <b>Difference: -1.1 pct pts (-8.6, 6.4)</b> 4. CS in past 10 years Arm1: 95/503 = 51.6% Control: 408/503 = 47.6% <b>Difference: 4 pct pts (-7.2, 15.2)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results						
<p><b>Author, Year:</b> Heyding et al., 2005</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Canada</p> <p><b>Setting:</b> Non-profit community agency providing services for women in low-income neighborhood</p> <p><b>Health System Factors:</b> EMR used for analysis</p> <p><b>Intervention Duration:</b> 2002 - rolling intervention throughout the year</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm1: CI + RSB1 + RSB2</p> <p>CI: luncheon before mammogram RSB1: admin barriers RSB2: transportation</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Women 50-70 years who used the Drop-In Center, a non-profit community agency providing services for women in a low-income neighborhood</p> <p><b>Sample Size:</b> 247</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: mean of 57.3 Gender: 100% female Race/Ethnicity: NR Income: women recruited from Drop-in Center where women w/ no income or low income or homeless stay; homeless shelter: 20.8%; independent housing 58% (low-income) Education: NR Insurance: 100%; Universal coverage (Canada) Foreign-born status: NR Co-morbidity: Psychiatric disorders, substance abuse Baseline screening: Baseline MAM in year 2001: 5.9%</p>	<p><b>Outcome Measure:</b> Completed MAM post intervention (compared to year just prior to intervention)</p> <p><b>How Ascertained:</b> Medical records</p> <p><b>Follow-up Time:</b> NR</p> <p><b>Results:</b> <b>Absolute effectiveness: B</b></p> <table border="0" style="width: 100%;"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm 1</td> <td style="text-align: center;">NR/158=4.7%</td> <td style="text-align: center;">26/89=29.1%</td> </tr> </table> <p><b>Change: 24.5 pct pts, p=0.0001</b></p>		Pre	Post	Arm 1	NR/158=4.7%	26/89=29.1%
	Pre	Post							
Arm 1	NR/158=4.7%	26/89=29.1%							

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Holland, 2005</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Southeast US</p> <p><b>Setting:</b> Community/ homes/ Managed Care/ MCO</p> <p><b>Health System Factors:</b> Coverage/MCO only</p> <p><b>Intervention Duration:</b> June 2003 - Jan 2004</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any)</p> <p>Arm 4: PR + SM1 Arm 5: PR + SM2 Control: Usual care</p> <p>PR: letters SM1: pamphlet to men SM2: postcard to participants' female household member</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Men 40-60 who were members of a single MCO who saw a PCP in prior 2 years but did not have any recommended preventive screenings within prior 2 years</p> <p><b>Sample Size:</b> 2754</p> <p><b>Attrition:</b> NA (medical claims data)</p> <p><b>Demographics:</b> Age: 50-60 Gender: 100% male Race/Ethnicity: Income: NR Education: NR Insurance: restricted to MCO members in a single health plan Foreign-born status: NR Co-morbidity: NR Baseline screening: NR</p>	<p><b>Outcome Measure:</b> Any CRC test (FOBT, flex sig, colonoscopy, DCBE)</p> <p><b>How Ascertained:</b> MCO claims data</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 4: 10.7% Control: 11.4% <b>Difference: -0.7 pct pts (-3.3, 1.9)</b></p> <p>Arm 5: 7.9% Control: 11.4% <b>Difference: -3.5 pct pts (-6.0, -1.0)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Holt et al., 2011</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Alabama, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> NR</p> <p><b>Intervention Duration:</b> NR</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal (colonoscopy, FOBT, flex sig)</p> <p>Arm 1: OE(SM) + GE(SM)</p> <p>OE: one-on-one discussions SM: some mailed booklets GE: small group presentations</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Members of three churches (2 predominantly African-American; 1 predominantly White) who were 45-50 years or older and had no history of CRC.</p> <p><b>Sample Size:</b> 122</p> <p><b>Attrition:</b> 50%</p> <p><b>Demographics:</b> Age: mean of 57 Gender: 65.6% female Race/Ethnicity: 15.6% White; 84.4% AA; Income: Median household income before taxes: \$70000-\$80000 Education: average years of education, 15 Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: 17% FOBT in 1 year: 17.2% FS in 5 years: 10.7% CS in 10 years: 18.0% DCBE in 5 years: 13.1%</p>	<p><b>Outcome Measure:</b> 1. FOBT in past year 2. FS in past 5 years 3. CS in past 10 years</p> <p><b>How Ascertained:</b> Telephone survey</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b></p> <p><b>1. FOBT in past year</b></p> <p>Arm1: Pre: 21/122=17.2% Post: 12/61=19.7% <b>Difference: 2.5 pct pts (-9.6, 14.5)</b></p> <p><b>2. FS in past 5 years</b></p> <p>Arm1: Pre: 13/122=10.7% Post: 9/61=14.8% <b>Difference: 4.1 pct pts (6.4, 14.6)</b></p> <p><b>3. CS in past 10 years</b></p> <p>Arm1: Pre: 22/122=18.0% Post: 18/61=29.5% <b>Difference: 11.5 pct pts (-1.9, 24.8)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results																								
<p><b>Author, Year:</b> Honein-AbouHaidar et al., 2013</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> least</p> <p><b>Quality of Execution:</b> good</p>	<p><b>Location:</b> Canada</p> <p><b>Setting:</b> Community, clinics</p> <p><b>Health System Factors:</b> Health system datasets such as OHIP, OCR, CIHI-DAD. Ontario has a publicly funded health care system with universal access for all residents.</p> <p><b>Intervention Duration:</b> Intervention implemented Apr 1, 2008</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (FOBT)</p> <p>Arm 1: MM + PI + other(PE)</p> <p>MM: public media campaign PI: PCPs responsible for initiating screening, delivering tests, and following-up positive FOBTs. PE: PCP education program introduced prior to and after launch Other: MD Education</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Ontario residents age 50-74 for each fiscal year from 2005-2011. 'Eligible' cohort: excluded history of CRC, ulcerative colitis, Crohn's disease, considered ineligible for screening by PCPs, no health care system contact in &gt;5 y. 'Eligible' cohort used for up-to-date outcome measures. 'Due' cohort: excluded those with FOBT in prior 12 months for each fiscal year or large bowel endoscopy within prior 4 years. 'Due' cohort used for FOBT and large bowel endoscopy outcomes.</p> <p><b>Sample Size:</b> "6 annual cohorts of entire population 05-06: 2231711 06-07: 2204710 07-08: 2140142 08-09: 2140454 09-10: 2018203 10-11: 2124950"</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: 50-55: 35%; 56-60: 24%; 61-65: 17%; 66-70: 14%; 71-74: 10% Gender: 51.0% female Race/Ethnicity: NR Income: Area level data 20% in each quintile (non-low income) Education: NR Insurance: 100% public Foreign-born status: NR Co-morbidity: NR Baseline screening: 27.2% - 35.2% (FY 2005, 2006, 2007)</p>	<p><b>Outcome Measure:</b> 1. UTD with any CRC screening 2. UTD with FOBT 3. FS or colonoscopy in past 5 years</p> <p><b>How Ascertained:</b> Administrative data</p> <p><b>Follow-up Time:</b> 36 months</p> <p><b>Results:</b></p> <p><b>Absolute effectiveness:</b></p> <p>1. UTD with any CRC screening</p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm1</td> <td style="text-align: center;">29.6%</td> <td style="text-align: center;">44.9%</td> </tr> </table> <p><b>Adjusted Difference: 15.3 pct pts (15.2, 15.4)</b></p> <p>2. UTD with FOBT</p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm1</td> <td style="text-align: center;">13.6%</td> <td style="text-align: center;">17.6%</td> </tr> </table> <p><b>Difference: 4.0 pct pts (3.9, 4.1)</b></p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm1</td> <td style="text-align: center;">11.5%</td> <td style="text-align: center;">14.8%</td> </tr> </table> <p><b>Adjusted Difference: 3.3 pct pts</b></p> <p>3. FS or colonoscopy in past 5 years</p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm1</td> <td style="text-align: center;">3.4%</td> <td style="text-align: center;">5.7%</td> </tr> </table> <p><b>Adjusted Difference: 2.3 pct pts</b></p>		Pre	Post	Arm1	29.6%	44.9%		Pre	Post	Arm1	13.6%	17.6%		Pre	Post	Arm1	11.5%	14.8%		Pre	Post	Arm1	3.4%	5.7%
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Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Honeycutt et al., 2013</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> US, Georgia</p> <p><b>Setting:</b> Community/Clinics</p> <p><b>Health System Factors:</b> Community Health Centers; 8 clinics within 2 CHCs and EMRs (4 in intervention arm and 4 in comparison); EMR; Paper Medical Charts</p> <p><b>Intervention Duration:</b> November 2009 - April 2011</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (colonoscopy)</p> <p>Arm 1: PR + OE + RSB + PAF + ROPC Control: Usual care</p> <p>PR: managed provider reminder systems OE: one-on-one patient education RSB: transportation assistance PAF: coordinate provider feedback on screening referral patterns ROPC: alleviate cost of screening</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Individuals aged 50 to 64 years, eligible for sliding-fee scale services (i.e., documented low-income, underinsured, or uninsured), and visited a clinic at least once during the study period. Excluded: history of CRC, colorectal polyps, ulcerative colitis, Crohn’s disease, or a first-degree relative with CRC or adenomatous polyps.</p> <p><b>Sample Size:</b> 809</p> <p><b>Attrition:</b> 17%</p> <p><b>Demographics:</b> Age: mean of 55.8 Gender: 67.1% female Race/Ethnicity: 37.1% White; 62.9% AA Income: NR Education: NR Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: 11.1%</p>	<p><b>Outcome Measure:</b> 1. Completion of any CRC screening 2. Completion of colonoscopy</p> <p><b>How Ascertained:</b> Abstraction from EMRs and Paper Medical Charts</p> <p><b>Follow-up Time:</b> 18 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. Completion of any CRC screening Arm1: 123/289 = 42.6% Control: 56/520 = 10.8% <b>Difference: 31.8 pct pts (25.5, 38.1)</b></p> <p>2. Completion of colonoscopy Arm1: 90/257 = 35.0% Control: 33/510 = 6.5% <b>Difference: 28.5 pct pts (22.3, 34.7)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Hou, 2005</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Taiwan</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> Taiwan has national health plan</p> <p><b>Intervention Duration:</b> Fall 1999</p> <p><b>Intervention Details:</b> Type of cancer addressed: cervical cancer</p> <p>Arm 1: CR + SM + OE + RSB Comparison: Usual care</p> <p>CR: Welcome letter with screening schedule OE: offered screening counseling RSB: admin barriers</p> <p><b>Presence of CHW/LHA/PN:</b> Other deliverer</p>	<p><b>Eligibility Criteria:</b> Female family members of inpatients admitted to study hospital were recruited. Women who were over 30 yrs (or younger if married) with no Pap in prior year (in Taiwan the national health plan covers annual Pap) were eligible. Excluded women who had undergone hysterectomy or had been diagnosed with cervical cancer.</p> <p><b>Sample Size:</b> 424</p> <p><b>Attrition:</b> NA; 58% response rate to mailed survey</p> <p><b>Demographics:</b> Age: mean of 34 Gender: 100% female Race/Ethnicity: NR Income: NR Education: &lt;HS: 28% Insurance: National health plan in Taiwan Foreign-born status: NR Co-morbidity: NR Baseline screening: no PAP in prior year</p>	<p><b>Outcome Measure:</b> Receipt of Pap smear at follow-up</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 3 months</p> <p><b>Results:</b> Increased cervical cancer screening rates in intervention group when compared to usual care; OR: 2.29</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Husaini et al., 2005</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Tennessee, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> NR</p> <p><b>Intervention Duration:</b> Duration not specified, occurred between 1998-2000</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 2: GE + OE + ROPC</p> <p>GE: group video presentation OE: additional education, demonstration of self-breast exam with a breast model ROPC: vouchers to facilitate access</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Intervention arm: African American churches in 5 rural counties of west TN were recruited, African American women aged 40 or older were recruited. Comparison arm: African American churches in metropolitan Nashville, TN, African American women aged 40 or older</p> <p><b>Sample Size:</b> 218</p> <p><b>Attrition:</b> 4.4%</p> <p><b>Demographics:</b> Age: mean of 56.3 Gender: 100% female Race/Ethnicity: 100% AA Income: &lt;\$1000/month: 25.1% ≥\$1000/month: 74.9% (low income) Education: mean # yrs: 13.8 Insurance: 3% none; 97% other Foreign-born status: NR Co-morbidity: NR Baseline screening: Included those never screened, not UTD, and UTD</p>	<p><b>Outcome Measure:</b> Completed recent MAM in 6 months</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Incremental effectiveness:</b></p> <p>Arm 2 Pre: 120/166 = 72.3% Post: 146/166 = 88.0% <b>Change: 15.7 pct pts (7.3, 24.1)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Jandorf et al., 2005</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> New York, US</p> <p><b>Setting:</b> Neighborhood health care setting</p> <p><b>Health System Factors:</b> Copayments/ FQHC so sliding scale OOP costs. FQHCs provide services regardless of ability to pay/ Other HC source/ All were pts of a FQHC. % with a PCP: 97.4% vs. 92.5% for RSB + PR vs. PR (not sig) (94.9% overall)</p> <p><b>Intervention Duration:</b> Jan-May 2002</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (FOBT, endoscopy)</p> <p>Arm 2: PR + RSB Arm 1: PR (comparison)</p> <p>PR: FOBT cards placed in patient charts as visual cue to physician RSB: appointment scheduling</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Patients attending a primary care practice in East Harlem, NYC, between Jan-May 2002, aged 50 or older with no FOBT within last year, no FS or barium enema within past 3-5 years, no colonoscopy within past 10 years.</p> <p><b>Sample Size:</b> 78</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: mean of 61.2 Gender: 74.4% female Race/Ethnicity: 82.1% Hispanic Income: Annual income &lt;\$10,000: 68% (low-income) Education: &lt;HS, 88.5%; ≥HS, 11.5% Insurance: 69.3% public Foreign-born status: NR Co-morbidity: NR Baseline screening: Not UTD at baseline</p>	<p><b>Outcome Measure:</b> 1. Completed FOBT in 3 months 2. Completed endoscopy in 6 months</p> <p><b>How Ascertained:</b> Chart views</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Incremental effectiveness:</b> 1. Completed FOBT in 3 months Arm 1: 25.0% Arm 2: 42.1% <b>Difference: 17.1 pct pts (-3.6, 37.8)</b> p=0.086</p> <p>2. Completed endoscopy in 6 months Arm 1: 5.0% Arm 2: 23.7% <b>Difference: 18.7 pct pts (3.6, 33.8)</b> p=0.019</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Jean-Jacques et al., 2012</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Illinois, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> FQHC with EHR</p> <p><b>Intervention Duration:</b> Feb - Apr 2010</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test, FOBT)</p> <p>Arm 1: RSB + OE Control: usual care</p> <p>RSB: FOBT kits, reminder letter, and CRC fact sheet mailed to participants OE: educator addressed questions regarding CRC screening in general and FOBT specifically</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Adults aged 50 to 80 years, had at least 2 visits to the study site between July 1, 2008 and December 31, 2009, with no history of colorectal cancer or total colectomy, and with no documented FOBT within 1 year, sigmoidoscopy within 5 years, or colonoscopy within 10 years as of December 31, 2009.</p> <p><b>Sample Size:</b> 202</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: mean of 60 Gender: 61.9% female Race/Ethnicity: 26.2%; 27.2% AA; 14% Asian; 12.4% other; 20.3% Hispanic Income: NR Education: NR Insurance: 27.2% public; 67.8% none; 5.0% other Foreign-born status: NR Co-morbidity: NR Baseline screening: Not UTD at baseline</p>	<p><b>Outcome Measure:</b> 1. Completed any CRC test (FOBT, sigmoidoscopy, or colonoscopy) 2. Completed FOBT</p> <p><b>How Ascertained:</b> EHR</p> <p><b>Follow-up Time:</b> 1. 12 months 2. 4 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. Completed any CRC test (FOBT, sigmoidoscopy, or colonoscopy) Arm 1: 40/104 = 38.0% Control: 15/95 = 15.0% <b>Difference: 23.2 pct pts (11.4, 34.9)</b> P = 0.002</p> <p>2. Completed FOBT Arm 1: 30/104 = 29.0% Control: 4/98 = 4.0% <b>Difference: 24.8 pct pts (15.2, 34.3)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results																		
<p><b>Author, Year:</b> Kaczorowski et al., 2013</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Southwestern Ontario, Canada</p> <p><b>Setting:</b> Primary care networks or family health networks in southwest Ontario.</p> <p><b>Health System Factors:</b> Data obtained from consortium of main laboratories in Ontario which captures more than 90% of total Pap tests conducted in province.</p> <p><b>Intervention Duration:</b> Intervention 2004 and 2005; results were fiscal year 2005 and 2006</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and cervical cancer</p> <p>Arm 1: PR + CR + PI</p> <p>PR: electronic system to identify and generate physician reminder lists of due and overdue patients CR: patient reminder letters created using text that was approved or modified by each physician, mailed PI: Annual bonus payments and eligibility to claim a management fee</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Practice-level: 73% (246 of 335) of the eligible family physicians in primary care network or family health network group in SW Ontario agreed to participate. In 2004: physicians had 83,101 female patients aged 35 to 69 eligible for biennial Pap, 39,780 female patients aged 50 to 69 eligible for biennial MAM. In 2005-06: roster increased by 1704 for Pap and 1873 for MAM.</p> <p><b>Sample Size:</b> information provided for physicians recruited into study, not individual patients included</p> <p><b>Attrition:</b> 5.7%</p> <p><b>Demographics:</b> Age: NR Gender: 100% female Race/Ethnicity: NR Income: NR Education: NR Insurance: Universal health insurance in Canada Foreign-born status: NR Co-morbidity: NR Baseline screening: 68.9% due for Pap; 70.0% due for MAM</p>	<p><b>Outcome Measure:</b> 1. Mean time-appropriate rate for MAM 2. Mean time-appropriate rate for Pap</p> <p><b>How Ascertained:</b> EHR</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>1. Mean time-appropriate rate for MAM</td> <td></td> <td></td> </tr> <tr> <td>Arm 1</td> <td style="text-align: center;">70.0%</td> <td style="text-align: center;">75.4%</td> </tr> </table> <p><b>Change: 5.3 pct pts (4.2, 6.4)</b> p&lt;0.001</p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>2. Mean time-appropriate rate for Pap</td> <td></td> <td></td> </tr> <tr> <td>Arm 1</td> <td style="text-align: center;">68.9%</td> <td style="text-align: center;">75.2%</td> </tr> </table> <p><b>Change: 6.3 pct pts (5.1, 7.5)</b> p&lt;0.001</p>		Pre	Post	1. Mean time-appropriate rate for MAM			Arm 1	70.0%	75.4%		Pre	Post	2. Mean time-appropriate rate for Pap			Arm 1	68.9%	75.2%
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Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Katz et al., 2007</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> North Carolina &amp; South Carolina, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> NR</p> <p><b>Intervention Duration:</b> Started September/October 2001 for regions 1&amp;2 and April 2002 for region 4</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: MM+SM+GE+PR Control: usual care</p> <p>MM: media campaigns using community newspapers and local radio stations SM: brochures GE: educational classes PR: chart reminders</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> 11 cities in NC and SC with subsidized housing communities were identified and grouped together in 4 regions that share media markets and are represented by the Southwest Division of the American Cancer Society. Cross-sectional sample of women 50+ years was randomly selected from housing authority resident lists in each region.</p> <p><b>Sample Size:</b> 2283</p> <p><b>Attrition:</b> N/A; participation rate: 27%</p> <p><b>Demographics:</b> Age: 50-64 38%; 65-74 30%; 75-84 22%; 85+ 9%. Gender: 100% female Race/Ethnicity: 19% white, 78% AA, 3% other Income: living in subsidized housing community Education: ≤8th grade 38%; 9th-10th 33%; HS 23%; some college 7% Insurance: 15% none; 85% other Foreign-born status: NR Co-morbidity: only provided for part of intervention group and not for control group (medical condition requiring regular visits: 64%) Baseline screening: UTD 49.3%</p>	<p><b>Outcome Measure:</b> Colorectal cancer screening using any test; FOBT within 1 year, flex sig within 5 years, DCBE within 5 years, or colonoscopy within 10 years</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 55.6% Control: 49.7% <b>Difference: 5.9 pct pts (2.4, 3.3)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Kempe et al., 2012</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Colorado, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> Nonprofit integrated care delivery system (Kaiser Permanente Colorado). EMR and multiple population registries for prevention and chronic disease management program, including a CRC registry.</p> <p><b>Intervention Duration:</b> Apr - Sept 2008</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal (FIT or colonoscopy)</p> <p>Arm 1: OE + RSB Control: usual care</p> <p>OE: interactive Voice Response calls with options for education about screening RSB: mailed FOBT kit with prepaid return envelope</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Average-risk members aged 50-74, unscreened by April 2008, continuously enrolled in HMO until April 2009. Exclusions: high-risk (personal history of CRC or polyps, first-degree family history of CRC, inflammatory bowel disease, and genetic syndromes), removal from registry by physician due to comorbidities, or evidence of completed screening (completed FOBT or FIT within 12 months or colonoscopy within 10 years). Members who had barium enema or sigmoidoscopy within 5 years were eligible for FIT outreach.</p> <p><b>Sample Size:</b> 58440</p> <p><b>Attrition:</b> 14.8%</p> <p><b>Demographics:</b> Age: mean of 58.8 Gender: 53% female Race/Ethnicity: 56.3% white; 2.4% AA; 2.3% other; 7.9% Hispanic Income: NR Education: NR Insurance: 100% insured (all members of Kaiser Permanente Colorado) Foreign-born status: NR Co-morbidity: Asthma: 7.3%; Chronic kidney disease: 1.5%; CHD: 5.0%; Diabetes: 9.4%; Heart failure: 1.3%; Hypertension: 43.5% Baseline screening: Not UTD with FIT/FOBT or colonoscopy</p>	<p><b>Outcome Measure:</b> Colorectal cancer screening by FIT or colonoscopy</p> <p><b>How Ascertained:</b> Analysis of EMR/screening registry data</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> Hazard Ratio: 3.75 (3.60–3.91) Adjusted for age, sex, race/ ethnicity, smoking, BMI, and comorbidities.</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Khankari et al., 2007</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Illinois, US</p> <p><b>Setting:</b> Community health clinic</p> <p><b>Health System Factors:</b> Federally qualified health center</p> <p><b>Intervention Duration:</b> Began in early 2005</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: SM + PR</p> <p>SM: brochure PR: mailing patients a physician letter</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> All clinic patients over 50+ (identified by the FQHC Decision Support System) who received care at the specified FQHC between Jan 1-Jan 28, 2002; eligible if patients had 3 or more visits to the clinic during this time period.</p> <p><b>Sample Size:</b> 154</p> <p><b>Attrition:</b> 11.5%</p> <p><b>Demographics:</b> Age: mean of 60.1 Gender: 67.8% female Race/Ethnicity: 51.7% AA; 44.8% Hispanic Income: site include FQHC that served low-income African American and Hispanic patients Education: NR Insurance: 8% private; 69.2% public; 22.8% none Foreign-born status: NR Co-morbidity: NR Baseline screening: UTD 11.5%</p>	<p><b>Outcome Measure:</b> Completion of CRC screening using any test</p> <p><b>How Ascertained:</b> Chart views</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <p>Arm 1 Pre: 20/174 = 11.5% Post: 44/154 = 28.6%</p> <p><b>Change: 17.1 pct pts (8.5, 25.6)</b> p&lt;0.001</p>

Study	Intervention Characteristics	Population Characteristics	Results						
<p><b>Author, Year:</b> Kim &amp; Sarna, 2004</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> California, US</p> <p><b>Setting:</b> Community (churches)</p> <p><b>Health System Factors:</b> 45% of participants had a regular HC provider</p> <p><b>Intervention Duration:</b> NR</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 2: GE + RSB Control: usual care</p> <p>GE: participants viewed the decision aid on a computer in a private area in the clinic either before or after their scheduled appointment. RSB: Alternative screening site</p> <p><b>Presence of CHW/LHA/PN:</b> Clinician educator</p>	<p><b>Eligibility Criteria:</b> Korean churches listed in Korean business telephone directories; Participants: Korean American women aged 40-75 with no MAM in prior year attending participating churches.</p> <p><b>Sample Size:</b> 141</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: mean of 47.9 Gender: 100% female Race/Ethnicity: 100% Korean American Income: &lt;\$10,000: 12%; \$10-24,999: 38%; \$25-39,000: 26%; &gt;\$40,000: 24% Education: &lt;HS: 6%; HS: 37%; &gt;HS: 57% Insurance: 78% none; 22% other (not specified) Foreign-born status: 100% Co-morbidity: NR Baseline screening: Never had MAM: 45%; No MAM within 1 year:100%</p>	<p><b>Outcome Measure:</b> Completed MAM</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 2 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <table border="0"> <tr> <td></td> <td style="text-align: right;">Post</td> </tr> <tr> <td>Arm 2</td> <td style="text-align: right;">87.0%</td> </tr> <tr> <td>Control</td> <td style="text-align: right;">47.0%</td> </tr> </table> <p><b>Difference: 40.0 pct pts (22.7, 57.3)</b></p>		Post	Arm 2	87.0%	Control	47.0%
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<p><b>Author, Year:</b> Krist et al., 2012</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Virginia, US</p> <p><b>Setting:</b> Primary care practices</p> <p><b>Health System Factors:</b> Practices part of private medical group with common EHR</p> <p><b>Intervention Duration:</b> 2008-2009</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer, cervical cancer, colorectal cancer (any test)</p> <p>Arm 1: SM + CR + PR + Other Control: usual care</p> <p>SM: developed a higher-functioning personal health record, called an interactive preventive health record (IPHR) for patients CR: Intervention group received up to 3 mailed invitations PR: after patients used the IPHR, system automatically forwarded a summary to patient's clinician Other: the interface offered patients hyperlinks to detailed personal messages about screening</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Active adults (18+) who have had an office visit for any reason between Nov 2007 and Nov 2009, to one of the 8 primary care clinics recruited for the study.</p> <p><b>Sample Size:</b> 4500</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: 18-34: 19.8%; 35-49: 30.0%; 50-64: 30.0%; 65-75: 20.1% Gender: 50% female Race/Ethnicity: 79.4 white; 6.3% AA; 9.5% Asian; 3.7% other; 6% Hispanic; 94.1% non-Hispanic Income: NR Education: ≥ College:66.1%; &lt; College: 33.9% Insurance: NR Foreign-born status: NR Co-morbidity: Diabetes: 8.9%; Cancer: 3.2%; Coronary artery: 4.4%; Hyperlipidemia: 31.8%; Hypertension: 28.5%; Baseline screening: CRC: 37.3%; CC: 48.2%; BC: 70.1%</p>	<p><b>Outcome Measure:</b></p> <ol style="list-style-type: none"> <li>Up-to-date with MAM</li> <li>Up-to-date with Pap</li> <li>Up-to-date with CRC screening, any test</li> </ol> <p><b>How Ascertained:</b> EMR, Self-report</p> <p><b>Follow-up Time:</b> 16 months</p> <p><b>Results:</b></p> <p><b>Absolute effectiveness:</b></p> <ol style="list-style-type: none"> <li>Up-to-date with MAM <table border="1" data-bbox="1402 597 1894 685"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>52.4%</td> <td>35.8%</td> <td>-16.6 pct pts</td> </tr> <tr> <td>Control</td> <td>44.1%</td> <td>29.6%</td> <td>-14.5 pct pts</td> </tr> </tbody> </table> <p><b>Difference: -2.1 pct pts (-6.0, 1.8)</b></p></li> <li>Up-to-date with Pap <table border="1" data-bbox="1402 766 1894 854"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>72.7%</td> <td>73.3%</td> <td>-0.6 pct pts</td> </tr> <tr> <td>Control</td> <td>67.6%</td> <td>68.4%</td> <td>-0.8 pct pts</td> </tr> </tbody> </table> <p><b>Difference: -0.2 pct pts (-4.0, 3.6)</b></p></li> <li>Up-to-date with CRC screening, any test <table border="1" data-bbox="1402 971 1894 1058"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>37.7%</td> <td>47.8%</td> <td>10.1 pct pts</td> </tr> <tr> <td>Control</td> <td>36.8%</td> <td>43.9%</td> <td>7.1 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 3.0 pct pts (0.1, 5.9)</b></p></li> </ol>		Pre	Post	Change	Arm 1	52.4%	35.8%	-16.6 pct pts	Control	44.1%	29.6%	-14.5 pct pts		Pre	Post	Change	Arm 1	72.7%	73.3%	-0.6 pct pts	Control	67.6%	68.4%	-0.8 pct pts		Pre	Post	Change	Arm 1	37.7%	47.8%	10.1 pct pts	Control	36.8%	43.9%	7.1 pct pts
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Arm 1	37.7%	47.8%	10.1 pct pts																																				
Control	36.8%	43.9%	7.1 pct pts																																				

<p><b>Author, Year:</b> Lasser et al., 2011</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Massachusetts, US</p> <p><b>Setting:</b> 4 health centers and 2 public hospital-based clinics that were part of a primary care practice-based research network composed of 15 community health centers</p> <p><b>Health System Factors:</b> All study sites used a common EHR</p> <p><b>Intervention Duration:</b> Sept 2008 - Mar 2009</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test, colonoscopy)</p> <p>Arm 1: CR(SM) + OE + RSB1 + RSB2(f/u CR) + RSB3 Comparison: usual care</p> <p>CR: sent letters signed by the PCP notifying patients that they were overdue for CRC screening SM: letters included a CRC screening brochure OE: patients not due to screening received education about CRC and screening tests RSB1: appointment scheduling RSB2: mailed FOBT to reduce admin barriers RSB3: reducing admin barriers through referral and open-access colonoscopy CR (f/u): for patients who chose FOBT, PN reviewed instructions and mailed FOBT cards and instructions. If not returned within 4 weeks, PN called to provide support and address barriers</p> <p><b>Presence of CHW/LHA/PN:</b> PN 3 PNs trained for study who were fluent in English and Spanish, Portuguese, or Haitian Creole.</p>	<p><b>Eligibility Criteria:</b> Aged 52-74 years, had 1 visit to PCP in each of 2 previous years at 1 study site, had not completed CRC screening (colonoscopy in past 10 years, sigmoidoscopy or DCBE in past 5 years, or FOBT in past year), spoke English, Haitian Creole, Portuguese, or Spanish as primary language. Excluded: with acute illness, an end-stage medical disease, severe psychiatric conditions, active substance abuse, or cognitive impairment.</p> <p><b>Sample Size:</b> 465</p> <p><b>Attrition:</b> 23.0%</p> <p><b>Demographics:</b> Age: mean of 61.3% Gender: 62% female Race/Ethnicity: 47.6% white; 27.7% AA; 17.6% other Income: NR Education: NR Insurance: 32.9% private; 61.9% public; 3.8% none; 1.3% other Foreign-born status: NR Co-morbidity: excluded those with acute illness, an end-stage medical disease, severe psychiatric condition, active substance abuse, or cognitive impairment. Baseline screening: Not UTD at baseline</p>	<p><b>Outcome Measure:</b> 1. Receipt of CRC screening, any test 2. Screened by colonoscopy 3. Screened by FOBT</p> <p><b>How Ascertained:</b> Medical record review</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. CRC screening, any test Arm 1: 33.6% Control: 20.0% <b>Difference: 13.6 pct pts (5.7, 21.5)</b></p> <p>2. Colonoscopy Arm 1: 26.4% Control: 13.0% <b>Difference: 13.4 pct pts (5.9, 20.1)</b></p> <p>3. FOBT Arm 1: 7.2% Control: 6.5% <b>Difference: 0.7 pct pts (-3.9, 5.3)</b></p>
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Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Lebwohl et al.,2011</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> New York, US</p> <p><b>Setting:</b> Academic tertiary care center</p> <p><b>Health System Factors:</b> Academic tertiary care center</p> <p><b>Intervention Duration:</b> June 2008- May 2009</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (colonoscopy)</p> <p>Arm 1: RSB1 + RSB2 + OE</p> <p>RSB1: reduce admin barriers (direct referral system, reserved screening session) RSB2: appointment assistance OE: community health liaisons were trained to guide candidates through screening colonoscopy using a newly developed direct endoscopy referral system</p> <p><b>Presence of CHW/LHA/PN:</b> PN Community health liaisons trained for protocol</p>	<p><b>Eligibility Criteria:</b> Patients identified by PCPs at hospital clinics; Excluded: age &gt; 75 years, treatment for heart failure or valve-related concerns, kidney disease, emphysema, recent diverticulitis; on anti-platelet or anticoagulation medication that cannot safely be stopped for 1 week; pregnant or possibly pregnant, history/presence of heme positive stool, hematochezia, or iron deficiency anemia, pacemaker or automated, implantable cardioverter/defibrillator, inflammatory bowel disease, severe cardiac/pulmonary/renal/hepatic disease, endocarditis, rheumatic fever, or intravascular prosthesis, difficult, incomplete, or poorly prepped colonoscopy, difficulty with previous sedation/anesthesia, sleep apnea.</p> <p><b>Sample Size:</b> 9899</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: mean of 60.4 Gender: 57% female Race/Ethnicity: self-reported data available for 53% of patients (39% white, 24% AA, 65% Hispanic) Education: NR Insurance: of patients undergoing colonoscopy, 87% had Medicaid Foreign-born status: NR Co-morbidity: NR Baseline screening: NR</p>	<p><b>Outcome Measure:</b> Change in the number of colonoscopies from 12 months pre-intervention to 12 months post-intervention</p> <p><b>How Ascertained:</b> Medical records</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results Narrative:</b> Compared to pre-intervention, number of screening colonoscopies increased by 8%</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Leffler et al., 2011</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Massachusetts, US</p> <p><b>Setting:</b> Major gastroenterology referral center</p> <p><b>Health System Factors:</b> EMR</p> <p><b>Intervention Duration:</b> Aug 1, 2009 to Feb 28, 2010</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (colonoscopy)</p> <p>Arm 1: PR + CR Control: usual care</p> <p>PR: automated follow-up reminder system CR: If the PCP does not modify the order, patients sent a letter 3 months before procedure due date; an identical letter sent one month before due date if no procedure has been scheduled or completed</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Patients who had colonoscopy at institution 5 years previously and were due for 5 year follow-up based on system recommendation. Excluded: <math>\geq 80</math>.</p> <p><b>Sample Size:</b> 830</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: mean of 60.8 Gender: 50.4% female Race/Ethnicity: 77.3% white; 8.1% AA; 2.7% Asian; 2.8% other Income: NR Education: NR Insurance: 72.8% private; 24.5% public; 2.8% none Foreign-born status: NR Co-morbidity: NR Baseline screening: 100% (repeat colonoscopy only)</p>	<p><b>Outcome Measure:</b> Completed colonoscopy</p> <p><b>How Ascertained:</b> EMR review</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness: CRC</b> Arm 1: <math>181/539 = 33.5\%</math> Control: <math>52/291 = 17.8\%</math> <b>Difference: 15.7 pct pts (9.8, 21.6)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Leone et al., 2013</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> North Carolina, US</p> <p><b>Setting:</b> Communities/home</p> <p><b>Health System Factors:</b> Practices in a Medicaid managed care regional network</p> <p><b>Intervention Duration:</b> Feb to Sept 2011</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: CR + SM + OE + RSB1 + RSB2 Control: usual care</p> <p>CR: mailed letter from their physician indicating that patients needed to be screened SM: 11-minute DVD providing information about CRC OE: motivational interviewing techniques to encourage screening and make a decision about screening and screening type RSB1: appointment scheduling RSB2: transportation</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Practices: within participating Medicaid managed care regional network; Patients: 50-74, enrolled in Medicaid and not Medicare, not up to date with CRC</p> <p><b>Sample Size:</b> 416</p> <p><b>Attrition:</b> Intervention, 1%</p> <p><b>Demographics:</b> Age: mean of 56.4 Gender: 57% female Race/Ethnicity: 40% white; 53% AA; 3% other Income: Medicaid beneficiaries (low income) Education: NR Insurance: 100% public Foreign-born status: NR Co-morbidity: Comorbidity score from Medicaid; a score of 3 means patient needs 3X more time/resources than average patients; Mean score (I vs. C): 3.5 vs. 4.4 Baseline screening: baseline CRC screening rates in intervention practices 30-52% (mean 35.6%) and in control practices 25.9%-52.1% (mean 46.0%); Patients: not up to date</p>	<p><b>Outcome Measure:</b> Completion of any CRC test</p> <p><b>How Ascertained:</b> Medicaid claims</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 16.3% Control: 10.3% <b>Difference: 6.0 pct pts (-0.5, 12.5)</b></p>

<p><b>Author, Year:</b> Levy et al., 2013</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Iowa, US</p> <p><b>Setting:</b> 16 family medicine offices in the Iowa Research Network (IRENE)</p> <p><b>Health System Factors:</b> 16 family medicine offices in the Iowa Research Network (IRENE). 8 practices used EMR.</p> <p><b>Intervention Duration:</b> December 2008-April 2010</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test, colonoscopy, FOBT, flex sig)</p> <p>Arm 2: PR + SM + RSB Arm 3: PR + SM + RSB + OE Control: usual care</p> <p>PR: physician chart reminder SM: written and DVD educational materials RSB: assess barriers, and move pts along stages of change toward screening OE: structured telephone call from project staff to provide education</p> <p><b>Presence of CHW/LHA/PN:</b> Other Deliverer</p>	<p><b>Eligibility Criteria:</b> Practice patients aged 52-79, due for CRC screening by any methods, not living in nursing homes.</p> <p><b>Sample Size:</b> 743</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: &lt;65: 534 (71.9%); ≥65: 209 (28.1%) Gender: 52.0% female Race/Ethnicity: 98.7% white; 0.5% AA; 0.1% Asian; 0.7% other; 1.1% Hispanic Income: &lt;40000: 273 (36.7%); 4-80000: 319 (42.9%); ≥80000: 104 (14.0%); Unknown: 47 (6.3%) Education: 36.7% ≤HS; 62.3% ≥any college Insurance: 6.9% none Foreign-born status: NR Co-morbidity: medical conditions: 2.7% Baseline screening: not UTD at baseline</p>	<p><b>Outcome Measure:</b></p> <ol style="list-style-type: none"> <li>CRC screening by any method</li> <li>Colonoscopy</li> <li>Take home FOBT</li> <li>Flexible Sigmoidoscopy</li> </ol> <p><b>How Ascertained:</b> Medical records</p> <p><b>Follow-up Time:</b> 15 months</p> <p><b>Results:</b></p> <p><b>Absolute effectiveness:</b></p> <ol style="list-style-type: none"> <li>Any CRC test Arm 2: 105/186 = 56.5% Control: 33/185 = 17.8% <b>Difference: 38.6 pct pts (29.6, 47.6)</b> p&lt;0.001 Arm 3: 107/187 = 57.2% Control: 33/185 = 17.8% <b>Difference: 39.4 pct pts (30.4, 48.4)</b> p&lt;0.001</li> <li>Colonoscopy Arm 2: 41/186 = 22.0% Control: 22/185 = 11.9% <b>Difference: 10.2 pct pts (2.6, 17.7)</b> Arm 3: 36/187 = 19.3% Control: 22/185 = 11.92% <b>Difference: 7.4 pct pts (0, 14.7)</b></li> <li>FOBT Arm 2: 88/186 = 47.3% Control: 5/185 = 2.7% <b>Difference: 44.6 pct pts (37.1, 52.2)</b> Arm 3: 94/187 = 50.3% Control: 5/185 = 2.7% <b>Difference: 47.6 pct pts (40.0, 55.1)</b></li> <li>Flexible Sigmoidoscopy Arm 2: 0/186 = 0.0%</li> </ol>
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Study	Intervention Characteristics	Population Characteristics	Results
			Control: 1/185 = 0.5% <b>Difference: -0.5 pct pts (-1.5, 0.5)</b> Arm 3: 0/187 = 0.0% Control: 1/185 = 0.5% <b>Difference: -0.5 pct pts (-1.5, 0.5)</b>
<p><b>Author, Year:</b> Lewis et al., 2012</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> North Carolina, US</p> <p><b>Setting:</b> Academic university internal medicine practice</p> <p><b>Health System Factors:</b> EMR</p> <p><b>Intervention Duration:</b> March – July 2006</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: CR + RSB +SM Control: usual care</p> <p>CR: letter reminding the patient that they were due for CRC screening RSB: standing orders SM: request the decision aid either in DVD or VHS format</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Aged 50-75, no record of being UTD with screening, seen in practice within previous 2 years.</p> <p><b>Sample Size:</b> 1498</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: mean of 61.2 Gender: 53.7% female Race/Ethnicity: 55.1% white; 37.7% AA; 7.2% other Income: NR Education: NR Insurance: 30.2% private; 41.1% public; 22.6% none Foreign-born status: NR Co-morbidity: NR Baseline screening: not UTD at baseline</p>	<p><b>Outcome Measure:</b> CRC screening completion from 7 to 130 days after intervention mailing</p> <p><b>How Ascertained:</b> EMR chart reviews</p> <p><b>Follow-up Time:</b> 4.5 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 34/716 = 4.7% Control: 19/782 = 2.4% <b>Difference: 2.3 pct pts (0.4, 4.2)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results						
<p><b>Author, Year:</b> Livaudais et al., 2010</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Washington, US</p> <p><b>Setting:</b> Community, home health parties</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> April 2007-September 2008</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: GE + RSB</p> <p>GE: breast cancer home health parties where flip charts and visual displays were used to supplement slide presentation RSB: scheduling assistance</p> <p><b>Presence of CHW/LHA/PN:</b> CHW; Promotoras; trained in general health and breast cancer education; bilingual</p>	<p><b>Eligibility Criteria:</b> Female participants between the ages of 40 and 79 years plus their friends, families, and neighbors.</p> <p><b>Sample Size:</b> 87</p> <p><b>Attrition:</b> 19.50%</p> <p><b>Demographics:</b> Age: mean of 50 Gender: 100% female Race/Ethnicity: 100% Hispanic Income: NR Education: 45.7% ≤4<sup>th</sup>; 38.6% 5<sup>th</sup>-8<sup>th</sup>; 15.7% ≥9<sup>th</sup> Insurance: 11.8% private; 11.8% public; 22% none; basic health plan for "other" Foreign-born status: NR Co-morbidity: NR Baseline screening: 70.8%</p>	<p><b>Outcome Measure:</b> MAM in past 2 years</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm 1</td> <td style="text-align: center;">46/87=52.9%</td> <td style="text-align: center;">50/87=57.4%</td> </tr> </table> <p><b>Change: 4.5 pct pts (-10.3, 19.3)</b></p>		Pre	Post	Arm 1	46/87=52.9%	50/87=57.4%
	Pre	Post							
Arm 1	46/87=52.9%	50/87=57.4%							

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Ma et al., 2009</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Pennsylvania, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> NR</p> <p><b>Intervention Duration:</b> Participants accrued between Jan - July 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: GE + RSB1 + RSB2 + RSB3 + RSB4 + ROPC Control: usual care</p> <p>GE: small group CRC education sessions in Korean RSB1: assistance with registration and other paperwork RSB2: arranging appointments/admin barrier RSB3: translation RSB4: transportation ROPC: Clinical partners provide services at reduced cost to uninsured/underinsured pts</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Active members of Korean churches, self-identified Korean Americans, age ≥50, no history of polyps, CRC or family history of CRC, never had CRC screening or were overdue (no FOBT in past year, no FS/DCBE in 5 years, no colonoscopy in 10 years)</p> <p><b>Sample Size:</b> 167 individuals from 6 churches</p> <p><b>Attrition:</b> 0%</p> <p><b>Demographics:</b> Age: mean of 63.2 Gender: 59% female Race/Ethnicity: 100% Korean American Income: &lt;\$10000: 35.3%; \$10-20000: 15.9%; \$20-30000: 21.3%; &gt;\$30000: 27.6% Education: &lt;HS, 21.0%; HS, 29.0%; University/graduate, 50.1% Insurance: 63.2% other Foreign-born status: 99.3% foreign born Co-morbidity: NR Baseline screening: never had CRC screening or were overdue for screening</p>	<p><b>Outcome Measure:</b> Completion of CRC screening during 12 month following intervention</p> <p><b>How Ascertained:</b> Self-report with MD verification</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 65/84 = 77.4% Control: 9/83 = 10.8% <b>Difference: 66.5 pct pts (55.4, 77.7)</b> p&lt;0.001</p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Manne et al., 2009</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> CRC patients identified from tumor registries or medical records</p> <p><b>Intervention Duration:</b> Recruitment: Dec 2003-July 2007; f/u Jan 2008</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (colonoscopy, FS/FOBT)</p> <p>Arm 1: SM Arm 2: SM + OE</p> <p>SM: participants mailed a personalized cover letter and the tailored booklet OE: Telephone counseling one week after receiving pamphlet; motivational interview; discussing issues surrounding CRC that were mentioned in the pamphlet</p> <p><b>Presence of CHW/LHA/PN:</b> CHW Health educator</p>	<p><b>Eligibility Criteria:</b> Patients were siblings of individuals diagnosed with CRC prior to age 61 and had been identified from tumor registries or medical records. Siblings age ≥35 or &lt;10 younger than age at which patient was diagnosed; full biological sibling; not on schedule with CRC screening; no history of cancer, family history of hereditary cancer, or history of IBD.</p> <p><b>Sample Size:</b> 412</p> <p><b>Attrition:</b> 18.4%</p> <p><b>Demographics:</b> Age: mean of 47.9 Gender: 60.2% female; Race/Ethnicity: 90.5% white; 8.6% non-white Income: &lt;\$20,000, 5.4%; \$20-59,999, 25.9%; \$60-99,999, 24.0%; \$100-139,999, 11.9%; ≥140,000, 9.0% (non-low income) Education: some HS: 5.4%; HS: 27.4%; some college: 23.2%; ≥college: 42.8% Insurance: 88.3% other (any) Foreign-born status: NR Co-morbidity: NR Baseline screening: 0% baseline (not UTD)</p>	<p><b>Outcome Measure:</b> 1. Colonoscopy self-reported within 8 months of baseline 2. Flex sig and an FOBT</p> <p><b>How Ascertained:</b> Self-report (77 of 88 reported screenings were confirmed via physicians)</p> <p><b>Follow-up Time:</b> 8 months</p> <p><b>Results:</b> <b>Incremental effectiveness:</b> adding OE 1. Colonoscopy self-reported within 8 months of baseline Arm 1: 40/161 = 24.8% Arm 2: 29/112 = 25.9% <b>Difference: 10.0 pct pts (-9.5, 11.6)</b> 2. Flex sig and FOBT Arm 1: 0/161 = 0.0% Arm 2: 0/112 = 0.0% <b>Difference: 0.0 pct pts</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Maxwell et al., 2010</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> California, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> July 2005 to Oct 2006</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: GE + CR Arm 2: GE + CR + RSB Comparison: usual care</p> <p>GE: 36 small-group CRC education sessions with printed take-home materials CR: reminder letter RSB: alternative site plus free FOBT kits provided</p> <p><b>Presence of CHW/LHA/PN:</b> Clinician educator Health educators, usual nurses. Completed training.</p>	<p><b>Eligibility Criteria:</b> Members/parishioners of 45 CBOs and churches with predominant/significant Filipino American membership. Filipino heritage, aged 50-70 years, no history of CRC, non-adherent to screening.</p> <p><b>Sample Size:</b> 548</p> <p><b>Attrition:</b> 21.2%</p> <p><b>Demographics:</b> Age: mean of 59.3% Gender: 66.2% female Race/Ethnicity: 100% Asian Income: &lt;50000: more than 2/3 (non-low income) Education: &lt;college, 32%; ≥college, 68% Insurance: 30% none; 70% other (any) Foreign-born status: 100% Co-morbidity: 79% any health problem Baseline screening: Not adherent at baseline</p>	<p><b>Outcome Measure:</b> Self-reported CRC screening, any test</p> <p><b>How Ascertained:</b> Self-report (subsample validated by physician mailing)</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 45/183 = 24.6% Control: 14/163 = 8.6% <b>Difference: 16.0 pct pts (8.4, 23.6)</b></p> <p>Arm 2: 61/202 = 30.2% Control: 14/163 = 8.6% <b>Difference: 21.6 pct pts (14.0, 29.3)</b></p> <p><b>Incremental effectiveness:</b> adding RSB Arm 1: 45/183 = 24.6% Arm 2: 61/202 = 30.2% <b>Difference: 5.6 pct pts (-3.3, 14.5)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results													
<p><b>Author, Year:</b> Michielutte et al., 2005</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> North Carolina, US</p> <p><b>Setting:</b> Clinic, home</p> <p><b>Health System Factors:</b> EMR/Coverage/all age 65+, Medicare insured</p> <p><b>Intervention Duration:</b> 1999-2002. For each practice, the total time between baseline and completion of intervention was about 9 months</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: SM + OE + RSB Control: usual care</p> <p>SM: pamphlet on breast cancer and breast cancer screening OE: simply written educational materials on breast cancer and screening mailed to women, and a brief telephone counseling session RSB: appointment scheduling</p> <p><b>Presence of CHW/LHA/PN:</b> Other deliverer Telephone counselor answered questions/concerns and discussed important barriers to screening</p>	<p><b>Eligibility Criteria:</b> Practices recruited from 15 counties in central and western NC, identified through a local HMO and through county medical societies. Primary sample patients: women ≥65, no history of BC, no MAM in past 15 months, no serious physical or cognitive problem; Maintenance patient sample: same as above, except had a MAM in previous year; By end of program, all women in maintenance sample were at least 1 month overdue for screening.</p> <p><b>Sample Size:</b> 2147</p> <p><b>Attrition:</b> 11%</p> <p><b>Demographics:</b> Age: mean of 72.9 Gender: 100% female Race/Ethnicity: 89.7% white; 10.3% non-white Income: NR Education: ≥HS, 57.7% Insurance: 100% Medicare; 82.8% Medicare with private supplemental insurance Foreign-born status: NR Co-morbidity: % with chronic health problems requiring regular MD care, 68.5% Baseline screening: Not UTD</p>	<p><b>Outcome Measure:</b></p> <ol style="list-style-type: none"> <li>MAM within 13 months of intervention start</li> <li>Repeat MAM within 13 months of intervention start</li> </ol> <p><b>How Ascertained:</b> Chart views</p> <p><b>Follow-up Time:</b> 13 months</p> <p><b>Results:</b></p> <p><b>Absolute effectiveness:</b></p> <ol style="list-style-type: none"> <li>MAM screening <table border="1" data-bbox="1402 597 1785 678"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>0%</td> <td>34.8%</td> </tr> <tr> <td>Control</td> <td>0%</td> <td>32.9%</td> </tr> </tbody> </table> </li> </ol> <p><b>Difference: 1.9 pct pts (-3.2, 7.0)</b> p=0.957</p> <ol style="list-style-type: none"> <li>Repeat MAM screening <table border="1" data-bbox="1402 799 1591 847"> <tbody> <tr> <td>Arm 1:</td> <td>47.8%</td> </tr> <tr> <td>Control:</td> <td>42.3%</td> </tr> </tbody> </table> </li> </ol> <p><b>Difference: 5.5 pct pts (-2.5, 13.5)</b> P=0.253</p>		Pre	Post	Arm 1	0%	34.8%	Control	0%	32.9%	Arm 1:	47.8%	Control:	42.3%
	Pre	Post														
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Control:	42.3%															

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Mosen et al., 2010</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Southwest Washington and Portland, OR</p> <p><b>Setting:</b> HMO; Kaiser Permanente Northwest (KPNW)</p> <p><b>Health System Factors:</b> HMO system; KPNW regional electronic databases</p> <p><b>Intervention Duration:</b> 2008</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test, FOBT)</p> <p>Arm 1: CR + RSB Comparison: usual care</p> <p>CR: general automated call providing info about FOBT; reminder call for participants to return completed FOBT kit RSB: mailed FOBT kit</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Individuals aged 51-80, not up to date with CRC through any of the CRC tests, not having a clinician order or referral for FOBT in past 3mon, with medical conditions indicating appropriate to be tested through FOBT, with continuous medical coverage 2 years prior to randomization</p> <p><b>Sample Size:</b> 5905</p> <p><b>Attrition:</b> 1.6% loss to follow-up</p> <p><b>Demographics:</b> Age: mean of 60.5 Gender: 50.2% female Race/Ethnicity: 92.4% white Income: NR Education: NR Insurance: All HMO Foreign-born status: NR Co-morbidity: 39.3% obesity Baseline screening: 0%</p>	<p><b>Outcome Measure:</b> 1. CRC screening by any test, 6 months after initial call 2. FOBT 6 months after the initial call</p> <p><b>How Ascertained:</b> KPNW regional electronic databases</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. Update to date with any CRC test: Arm 1: 23.9% Control: 17.6% <b>Difference: 6.3 pct pts</b></p> <p>2. FOBT Arm 1: 22.5% Control: 16.0% <b>Difference: 6.5 pct pts</b></p>

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<p><b>Author, Year:</b> Moskowitz et al., 2007</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> California, US</p> <p><b>Setting:</b> 2 communities</p> <p><b>Health System Factors:</b> Other healthcare source; 70-82% reported having "one source of care"</p> <p><b>Intervention Duration:</b> June 1999 to Jan 2002</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and cervical cancers</p> <p>Stepped intervention; Arm 1: SM + GE + OE + CI + RSB + MM Phase 1: SM + GE + OE Phase 2: GE + SM + CI1 + RSB Phase 3: GE + SM + CI2 + MM Comparison: usual care</p> <p>CI1: \$10 to participant's churches if they completed screening CI2: \$15 gift card for shopping GE: Korean American nurse or social work-led info sessions delivered in churches MM: newspaper and radio ads to publicize the BC and CC screening incentives program OE: health counselor-led sessions; also cover barriers to screening RSB: health counselors linked women with regular providers and insurance SM: brochures and posters in Korean on BC and CC screening</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Women 18+ years (phase 1) or 50+ years (phase 3) who self-identified as Korean, Korean American or of Korean descent</p> <p><b>Sample Size:</b> 1694</p> <p><b>Attrition:</b> N/A; cross-sectional samples taken at baseline and follow-ups</p> <p><b>Demographics:</b> Age: 32.9% 18-34; 44.8% 35-49; 12.9% 50-64; 8.3% 65+ Gender: 100% female Race/Ethnicity: 100% Korean American Income: NR Education: 33.7% ≤ HS Insurance: 67.4% private; 10.7% public; 21.9% none Foreign-born status: 95.2% foreign born Co-morbidity: NR Baseline screening: 61.8% UTD with Pap; 50.4% UTD with MAM</p>	<p><b>Outcome Measure:</b> 1. Completed Mam in previous 2 years among women 50+ 2. Completed Pap in previous 3 years among women 18+</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 48 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. MAM:</p> <table border="1" data-bbox="1402 649 1898 738"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Interv</td> <td>43.6%</td> <td>69.6%</td> <td>26 pct pts</td> </tr> <tr> <td>Control</td> <td>28.7%</td> <td>58.8%</td> <td>30.1 pct pts</td> </tr> </tbody> </table> <p><b>Difference: -4.1; p&gt;0.05</b></p> <p>2. Pap:</p> <table border="1" data-bbox="1402 820 1898 909"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Interv</td> <td>53.9%</td> <td>66.9%</td> <td>13 pct pts</td> </tr> <tr> <td>Control</td> <td>60.7%</td> <td>65.1%</td> <td>4.4 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 8.6; p&gt;0.05</b></p>		Pre	Post	Change	Interv	43.6%	69.6%	26 pct pts	Control	28.7%	58.8%	30.1 pct pts		Pre	Post	Change	Interv	53.9%	66.9%	13 pct pts	Control	60.7%	65.1%	4.4 pct pts
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Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Myers et al., 2007</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Pennsylvania, US</p> <p><b>Setting:</b> Communities, homes</p> <p><b>Health System Factors:</b> All participants are patients of a large urban university practice</p> <p><b>Intervention Duration:</b> No specific dates provided; started after March 2002 and lasted a year</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: CR1 + RSB Arm 2: CR2 + RSB Arm 3: CR3 + RSB Comparison: usual care</p> <p>CR1: mailed invitation letter with follow-up reminder letter to those due for screening CR2: CR1 plus 2 tailored message pages addressing personal barriers to screening CR3: CR2 plus telephone reminder call RSB: mailed FOBT cards</p> <p><b>Presence of CHW/LHA/PN:</b> Other deliverer</p>	<p><b>Eligibility Criteria:</b> Consenting patients of a large urban practice located at Thomas Jefferson University; ages 50-74, no history of CRC or IBD, had ≥1 visits within prior 2 years; had contact info and no recent CRC screening (stool blood test within 1yr, FS within 5yrs, DCBE within 5yrs or colonoscopy within 10yrs).</p> <p><b>Sample Size:</b> 1546</p> <p><b>Attrition:</b> 26.1% loss to follow-up</p> <p><b>Demographics:</b> Age: between 50-74 Gender: 67% female Race/Ethnicity: 58% African American Income: NR Education: 49% ≤ HS; Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: 0%</p>	<p><b>Outcome Measure:</b> Any CRC screening, including documented stool blood test (FOBT or FIT), self-reported or documented FS, colonoscopy or DCBE</p> <p><b>How Ascertained:</b> Self-reported or documented by clinic</p> <p><b>Follow-up Time:</b> 24 months after randomization</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm1: 45.8% Control: 32.6% <b>Difference: 13.2 pct pts (CI: 6.4, 20.0)</b></p> <p>Arm 2: 43.8% Control: 32.6% <b>Difference: 11.2 pct pts (CI: 4.4, 18.0)</b></p> <p>Arm 3: 48.5% Control: 32.6% <b>Difference: 15.9 pct pts (CI: 9.1, 22.7)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Myers et al., 2013</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Delaware, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> 10 primary care practices involved; centrality, a medical record system used</p> <p><b>Intervention Duration:</b> 2007-2011</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: RSB + SM1 + CR Arm 2: RSB + SM2 + CR + OE Comparison: usual care</p> <p>RSB: mailed stool blood test kit SM1: mailed information booklet on CRC screening with a personalized letter SM2: SM1 + CRC screening test materials tailored to each individual's preferred CRC screening test CR: mailed reminder letter OE: trained navigator contacted each participant after initial mailing to address barriers, provide information, and encourage testing</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Participants identified through electronic medical records; patients 50-79 years of age, no prior diagnosis of colorectal neoplasia or inflammatory bowel disease, visited one of the participating practices within previous 2 years, had complete contact info, and no UTD with CRC screening</p> <p><b>Sample Size:</b> 951</p> <p><b>Attrition:</b> 0.63% lost to follow-up</p> <p><b>Demographics:</b> Age: 70% 50-59; 22% 60-69, 9% 70-79 Gender: 62.3% female Race/Ethnicity: 78% white, 22% non-white; 1.7% Hispanic, 97.2% non-Hispanic Income: NR Education: 42.4% ≤ HS Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: 0%</p>	<p><b>Outcome Measure:</b> UTD with any CRC test within last 12 months</p> <p><b>How Ascertained:</b> Self-reports validated by medical records</p> <p><b>Follow-up Time:</b> 12 months after randomization (also provided data at 6 months)</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 115/316 = 36.4% Control: 57/317 = 18.0% <b>Difference: 18.4 pct pts (CI: 11.6, 25.2)</b></p> <p>Arm 2: 133/312 = 42.6% Control: 57/317 = 18.0% <b>Difference: 24.6 pct pts (CI: 17.7, 31.6)</b></p>

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<p><b>Author, Year:</b> Nguyen, B. et al., 2010</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> CA and TX, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> NR</p> <p><b>Intervention Duration:</b> July 2004 to April 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (FOBT, colonoscopy/FS)</p> <p>Arm 1: MM + SM Comparison: usual care</p> <p>MM: using established Vietnamese-language media outlets to disseminate CRC screening information SM: booklets with bilingual content distributed at community sites</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Self-identified as Vietnamese or Vietnamese American, 50-74 years of age, reside in Alameda or Santa Clara counties in CA, or Harris County in TX, intending to stay in study area for duration of intervention, and able to understand either Vietnamese or English</p> <p><b>Sample Size:</b> 533</p> <p><b>Attrition:</b> 40.4% loss to follow-up</p> <p><b>Demographics:</b> Age: 74% 50-64, 26% 65-74 Gender: 44% female Race/Ethnicity: 100% Asian Income: 40% &lt; \$20000, 26% ≥ \$20000, 34% unknown Education: 40% &lt; HS, 44% HS, 16% college Insurance: 36% private, 43% public, 22% no insurance Foreign-born status: 29% ≤ 10yrs in US, 71% &gt; 10yrs in US Co-morbidity: self-perceived health, 50.1% Fair/poor, 49.9% Excellent/good Baseline screening: 24% UTD FOBT; 18% UTD colonoscopy/sigmoidoscopy</p>	<p><b>Outcome Measure:</b> 1. FOBT screening within past year 2. Colonoscopy/sigmoidoscopy within past 5 years</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. FOBT within past year:</p> <table border="1" data-bbox="1394 565 1850 651"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1:</td> <td>27%</td> <td>36%</td> <td>9 pct pts</td> </tr> <tr> <td>Control:</td> <td>21%</td> <td>26%</td> <td>5 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 4 pct pts, p=0.301</b></p> <p>2. Colonoscopy/sigmoidoscopy within 5 years:</p> <table border="1" data-bbox="1394 769 1850 855"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1:</td> <td>20%</td> <td>44%</td> <td>24 pct pts</td> </tr> <tr> <td>Control:</td> <td>16%</td> <td>30%</td> <td>14 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 10 pct pts, p=0.035</b></p>		Pre	Post	Change	Arm 1:	27%	36%	9 pct pts	Control:	21%	26%	5 pct pts		Pre	Post	Change	Arm 1:	20%	44%	24 pct pts	Control:	16%	30%	14 pct pts
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<p><b>Author, Year:</b> Nguyen, T. et al., 2006</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> California &amp; Texas, US</p> <p><b>Setting:</b> Community, clinic</p> <p><b>Health System Factors:</b> NR</p> <p><b>Intervention Duration:</b> 2002-2004</p> <p><b>Intervention Details:</b> Type of cancer addressed: cervical cancer</p> <p>Arm 1: MM + SM + GE + ROPC + RSB1 + RSB2 + RSB3 + CR Comparison: usual care</p> <p>CR: Mailed postcards to remind women of PAP testing MM: use of Vietnamese media channels to spread info about CC screening SM: booklets in Vietnamese GE: trained LHW presentation held question and answer session ROPC; free screening for low-income women RSB1: appointment scheduling assistance through LHW RSB2: alternative screening sites, weekly clinic set up by county medical system RSB3: a bilingual staff person helped women navigate by phone. From 2001 - 2003, 1257 women received phone assistance. Occurred at Pap clinic.</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Women aged 18+, resident in intervention (Santa Clara, CA) or comparison (Harris, TX) counties who self-identified as Vietnamese</p> <p><b>Sample Size:</b> 3575</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: mean of 46.1 years Gender: 100% female Race/Ethnicity: 100% Asian Income: 24.8% below poverty level Education: 40% &lt; HS Insurance: 70% insured, 30% not insured Foreign-born status: mean of 13.2 years in the US Co-morbidity: NR Baseline screening: 62.1% UTD</p>	<p><b>Outcome Measure:</b> PAP in prior 12 months</p> <p><b>How Ascertained:</b> Self-reported</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1:</td> <td>64.9%</td> <td>70.4%</td> <td>5.5 pct pts</td> </tr> <tr> <td>Control:</td> <td>59.2%</td> <td>53.1%</td> <td>-6.1 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 11.6 pct pts, p&lt;0.001</b></p>		Pre	Post	Change	Arm 1:	64.9%	70.4%	5.5 pct pts	Control:	59.2%	53.1%	-6.1 pct pts
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Control:	59.2%	53.1%	-6.1 pct pts												

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Nguyen T. et al., 2009</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> California, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> Sept 2004 to March 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: MM + SM Arm 2: MM + SM + GE + RSB</p> <p>MM: using Vietnamese media channels to spread messages encouraging women to obtain MAM SM: bilingual BC screening booklets GE: group outreach sessions organized by LHW RSB: appointment scheduling assistance by LHWs</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Vietnamese ethnicity female aged 40 and above, residing in intervention county</p> <p><b>Sample Size:</b> 1100</p> <p><b>Attrition:</b> 1%</p> <p><b>Demographics:</b> Age: mean of 57.3 years Gender: 100% Race/Ethnicity: 100% Asian Income: NR Education: 58.2% &lt; 12 years of education Insurance: 21% private, 59% public, 20% no insurance Foreign-born status: mean 13.6 years in US Co-morbidity: NR Baseline screening: 69.4% UTD</p>	<p><b>Outcome Measure:</b> MAM in past 2 years</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 2 months after intervention</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1, pre: 74% Arm 1, post: 75.6% <b>Change: 1.6 pct pts, p=0.37</b></p> <p>Arm 2, pre: 64.7% Arm 2, post: 82.1% <b>Change: 17.4 pct pts, p&lt;0.001</b></p> <p><b>Incremental effectiveness:</b> Arm 1, change: 1.6 pct pts Arm 2, change: 17.4 pct pts <b>Difference:</b> Arm 2 vs. Arm 1, adding GE + RSB: <b>15.8 pct pts, p&lt;0.001</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Otero-Sabogal et al., 2006</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> California, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> Community clinics serving a low-income, uninsured population</p> <p><b>Intervention Duration:</b> Sept-Nov 2000 through Aug-Oct 2001</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: CR + RSB + OE1 + PR Arm 2: CR + RSB + OE2 + PR</p> <p>CR: mailed bilingual reminder cards one month prior to scheduled appointments OE1: nurses assess patient’s knowledge of BC screening and barriers; barriers addressed OE2: OE1 + additional 5-10 min tailored counseling call to women due for screening RSB: appointment scheduling assistance PR: flow sheet attached to each chart listing BC exams needed and the recommendations to be given to each patient</p> <p><b>Presence of CHW/LHA/PN:</b> Clinician educator</p>	<p><b>Eligibility Criteria:</b> Clinics: higher percent of women &gt;50 than younger, not involved in another screening study, rescreening rates &lt; 0.36 (median in all Every Woman Counts clinics in CA), serves multi-ethnic population. Participants: ≥50 years, normal MAM results, received MAM at clinic, no BC diagnosis within 5 years. Excluded those with prior unknown MAM result, MAM funded by a non-BCCP source, or have repeat screening done.</p> <p><b>Sample Size:</b> 400</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: 57% 50-70, 43% &gt;70 Gender: 100% female Race/Ethnicity: 52% Hispanic Income: mean clinic poverty index of 0.92 Education: NR Insurance: 100% uninsured Foreign-born status: NR Co-morbidity: NR Baseline screening: 100%; study examined repeated screening</p>	<p><b>Outcome Measure:</b> Repeat BC screening: completed MAM within 10-18 months of initial MAM</p> <p><b>How Ascertained:</b> Chart review</p> <p><b>Follow-up Time:</b> 18 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1, pre: 44.4% Arm 1, post: 45.1% <b>Change: 0.7 pct pts, p=0.91</b></p> <p>Arm 2, pre: 30.1% Arm 2, post: 48.2% <b>Change: 18.1 pct pts</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Percac-Lima et al., 2008</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Massachusetts, US</p> <p><b>Setting:</b> Clinical, Massachusetts General Hospital Chelsea HealthCare Center</p> <p><b>Health System Factors:</b> Validated electronic patient registry</p> <p><b>Intervention Duration:</b> Jan to Sept 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test, colonoscopy)</p> <p>Arm 1: OE + SM + RSB1 + RSB2 Comparison: usual care</p> <p>OE: initial interview to explore barriers and education about CRC screening SM: letter in appropriate language explaining project and providing educational material RSB1: scheduling assistance through PN RSB2: transportation arranged by PN; free shuttle or taxi voucher</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Patients 52-79 years of age, not UTD with CRC screening (no colonoscopy in last 10 years, or sigmoidoscopy/DCBE in past 5 years, or home FOBT in past year); Excluded if patients were acutely ill, or had dementia, metastatic cancer, schizophrenia, or any end stage disease</p> <p><b>Sample Size:</b> 1223</p> <p><b>Attrition:</b> 6.5% loss to follow-up</p> <p><b>Demographics:</b> Age: mean age of 63 years Gender: 60% female Race/Ethnicity: 47.3% white, 5.5% African American, 2.3% Asian, 4.8% other, 40.1% Hispanic Income: NR Education: NR Insurance: 53.6% private, 29.9% public, 3.2% uninsured, 13.2% free care Foreign-born status: NR Co-morbidity: NR Baseline screening: 0%</p>	<p><b>Outcome Measure:</b> 1. Received any CRC screening within past 9 months 2. Received colonoscopy within past 9 months</p> <p><b>How Ascertained:</b> Electronic medical records</p> <p><b>Follow-up Time:</b> 9 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. UTP with any CRC test: Arm 1: 27.4% Control: 11.9% <b>Difference: 15.5 pct pts, p&lt;0.001</b></p> <p>2. Colonoscopy: Arm 1: 20.8% Control: 9.6% <b>Difference: 11.2 pct pts, p&lt;0.001</b></p>

Study	Intervention Characteristics	Population Characteristics	Results																								
<p><b>Author, Year:</b> Percac-Lima et al., 2013</p> <p><b>Study Design:</b> Retrospective cohort</p> <p><b>Suitability of Design:</b> Moderate</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Massachusetts, US</p> <p><b>Setting:</b> Community and health facility</p> <p><b>Health System Factors:</b> Electronic Records; community health center affiliated with academic tertiary care center</p> <p><b>Intervention Duration:</b> 2008-2011</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: SM + OE + RSB1 + RSB2 + RSB3 + CR Comparison: usual care, separated into English speaking women and Spanish speaking women</p> <p>SM: mailed letter with culturally and linguistically appropriate education info re BC OE: navigators provided info re BC screening RSB1: appointment scheduling assistance through PN RSB2: transportation arranged with PN's help RSB3: reduced admin barriers with PN's help, such as resolving insurance issues or accompany to appointment CR: refugee women eligible for program contact by PN at beginning of each year; participants from previous years receive reminder phone calls</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Refugee women 40-74 years of age, self-identified as speaking Serbo-Croatian, Somali, or Arabic, and received primary care at Massachusetts General Hospital Chelsea Healthcare Center (MGH Chelsea); excluded if they had bilateral mastectomy; Comparison groups consisted of English speaking and Spanish-speaking women 40-74 years of age, receiving care at MGH Chelsea during the same period</p> <p><b>Sample Size:</b> 4274, 188 in intervention group</p> <p><b>Attrition:</b> 42% for intervention group</p> <p><b>Demographics:</b> Age: mean age of 54.4 years Gender: 100% female Race/Ethnicity: 35.8% white, 6.0% African American, 1.0% Asian, 1.1% other, 56.1% Hispanic Income: NR Education: NR Insurance: 55.2% private, 39.5% public Foreign-born status: 100% for intervention group Co-morbidity: NR Baseline screening: 80.1% had MAM in previous 2 years</p>	<p><b>Outcome Measure:</b> MAM in prior 2 years</p> <p><b>How Ascertained:</b> Electronic records</p> <p><b>Follow-up Time:</b> 48 months from baseline measurement</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Adjusted for clustering by primary physician; patient age, race, insurance status, and number of clinic visits used as covariates to control for differences in patient characteristics</p> <table border="0"> <tr> <td></td> <td>Pre</td> <td>Post</td> <td>Change</td> </tr> <tr> <td>Arm 1: Control, English speaking:</td> <td>64.1%</td> <td>81.2%</td> <td>17.1 pct pts</td> </tr> <tr> <td></td> <td>76.5%</td> <td>80.0%</td> <td>3.5 pct pts</td> </tr> </table> <p><b>Difference: 13.6 pct pts (CI: 7.8, 19.4 pct pts)</b></p> <table border="0"> <tr> <td></td> <td>Pre</td> <td>Post</td> <td>Change</td> </tr> <tr> <td>Arm 1: Control, Spanish speaking:</td> <td>64.1%</td> <td>81.2%</td> <td>17.1 pct pts</td> </tr> <tr> <td></td> <td>85.2%</td> <td>87.6%</td> <td>2.4 pct pts</td> </tr> </table> <p><b>Difference: 14.7 pct pts (CI: 8.9, 20.5 pct pts)</b></p>		Pre	Post	Change	Arm 1: Control, English speaking:	64.1%	81.2%	17.1 pct pts		76.5%	80.0%	3.5 pct pts		Pre	Post	Change	Arm 1: Control, Spanish speaking:	64.1%	81.2%	17.1 pct pts		85.2%	87.6%	2.4 pct pts
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Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Persell et al., 2011</p> <p><b>Study Design:</b> Prospective cohort with non-concurrent comparison</p> <p><b>Suitability of Design:</b> Moderate</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Illinois, US</p> <p><b>Setting:</b> Large academic primary care internal medicine practice</p> <p><b>Health System Factors:</b> Commercial EHR</p> <p><b>Intervention Duration:</b> Feb 2008 to Feb 2009</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and cervical cancers, colorectal cancer (any test)</p> <p>Arm 1: SM + OE +RSB1 + RSB2 Comparison: usual care</p> <p>SM: mailed educational materials OE: if phone contact established, identify and address barriers by providing education RSB1: reducing admin barriers RSB2: appointment scheduling</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Known refusers; Patients eligible if physician entered standardized documentation in EHR that patient had refused a preventive service that physician recommended (such as CRCS, BC screening, CC screening, etc.)</p> <p><b>Sample Size:</b> 785</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: mean age of 63 years Gender: 82.3% female Race/Ethnicity: 36.8% white, 34.4% African American, 3.9% other, 5.1% Hispanic Income: NR Education: NR Insurance: 40.5% private, 55.8% public, 3.7% uninsured or self-pay Foreign-born status: NR Co-morbidity: NR Baseline screening: 0%</p>	<p><b>Outcome Measure:</b> 1. BC: MAM received within 6 months 2. CC: PAP received within 6 months 3. CRC: any CRC tests received within 6 months</p> <p><b>How Ascertained:</b> EMR</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. MAM: Arm 1: 3/89 = 3.4% Control: 5/118 = 4.2% <b>Change: -0.9 (CI: -6, 4.4)</b></p> <p>2. PAP: Arm 1: 8/60 = 13.3% Control: 6/83 = 7.2% <b>Change: 6.1 pct pts (CI: -4.1, 16.4)</b></p> <p>3. CRC, UTD with any CRC tests: Arm 1: 11/249 = 4.4% Control: 5/191 = 2.6% <b>Change: 1.8 pct pts (CI: -1.6, 5.2)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results												
<p><b>Author, Year:</b> Phillips et al., 2010</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Massachusetts, US</p> <p><b>Setting:</b> Internal medicine practices of an academic safety-net hospital</p> <p><b>Health System Factors:</b> EMR, electronic administrative database SDK</p> <p><b>Intervention Duration:</b> Feb to Nov 2008</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: OE + RSB1 + RSB2 Comparison: usual care</p> <p>OE: phone call from PN to address barriers and provide educational messages RSB1: appointment scheduling through PN RSB2: transportation needs arranged through PN</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> Women aged 51-70 who were assigned a PCP and had a documented visit with that provider in the previous 2 years. Excluded if had documentation of bilateral mastectomy</p> <p><b>Sample Size:</b> 3895</p> <p><b>Attrition:</b> 75% lost to follow-up</p> <p><b>Demographics:</b> Age: mean age of 60 years Gender: 100% female Race/Ethnicity: 29% white, 47% African American, 13% other, 11% Hispanic Income: NR Education: 34% &lt; HS, 22% HS/GED, 18% some college, 15% &gt; some college Insurance: 37% private, 63% public Foreign-born status: NR Co-morbidity: 26% with score 1, 8% with score 2; comorbidity assessed using the Charlson Index Baseline screening: NR</p>	<p><b>Outcome Measure:</b> MAM within past 24 months</p> <p><b>How Ascertained:</b> EMR</p> <p><b>Follow-up Time:</b> NR</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <table border="1" data-bbox="1402 479 1894 565"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1:</td> <td>77.7%</td> <td>86.7%</td> <td>9.0 pct pts</td> </tr> <tr> <td>Control:</td> <td>78.5%</td> <td>76.5%</td> <td>-2.0 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 11.0 pct pts (CI: 8.6, 13.4)</b></p>		Pre	Post	Change	Arm 1:	77.7%	86.7%	9.0 pct pts	Control:	78.5%	76.5%	-2.0 pct pts
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Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Pignone et al., 2011</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Florida and Georgia, US</p> <p><b>Setting:</b> Clinics</p> <p><b>Health System Factors:</b> EMR system; more practices in usual care have CRC reminder system than intervention</p> <p><b>Intervention Duration:</b> After March 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: PAF + SM Comparison: usual care</p> <p>PAF: 2 sessions with each clinic to go over CRC screening info, provide practice-specific screening rates, make practice-specific plans to address screening requests SM: decision aid for intervention participants</p> <p><b>Presence of CHW/LHA/PN:</b> N/A</p>	<p><b>Eligibility Criteria:</b> Aetna members whose PCPs agreed to participate, aged 52-80, not current with CRC screening; Excluded if increased CRC risk, certain medical conditions, unable to communicate in English, no longer insured by Aetna or no longer receiving care in participating practices;</p> <p><b>Sample Size:</b> 32 practices with 467 patients</p> <p><b>Attrition:</b> 15.6% loss to follow-up</p> <p><b>Demographics:</b> Age: 75.8% 52-59yrs; 24.2% 60-82yrs Gender: 62.1% female Race/Ethnicity: 80.9% white, 15.2% African American, 3.9% other Income: 37.1% ≤\$50,000; 33.7% \$50,001-100,000; 13.4% &gt; \$100,000; 15.7% NR Education: 19.7% ≤ HS/GED; 33.9% some college; 26% college graduate; 20.4% post graduate Insurance: All insured through Aetna HMO Foreign-born status: NR Co-morbidity: 50.6% no chronic illnesses; 49.4% with 1 or more chronic illnesses Baseline screening: 0%</p>	<p><b>Outcome Measure:</b> Completion of any CRC tests at 30 months</p> <p><b>How Ascertained:</b> Claims data</p> <p><b>Follow-up Time:</b> 30 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 71/207 = 34.3% Control: 70/226 = 31.0% <b>Difference: 3.3 pct pts (CI: -5.5, 12.1)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results																								
<p><b>Author, Year:</b> Potter et al., 2009</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> San Francisco, CA, US</p> <p><b>Setting:</b> Primary care clinics</p> <p><b>Health System Factors:</b> EMR system used to obtain screening outcomes</p> <p><b>Intervention Duration:</b> Sept 05 to March 06</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: SM Arm 2: SM + CR Comparison: usual care</p> <p>SM: posters CR: call made 2-4 weeks after study participants order CRC screening</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Established patients at included clinics, ≥50 years, visited one of the included clinics during study period,</p> <p><b>Sample Size:</b> 7303</p> <p><b>Attrition:</b> 7.7%</p> <p><b>Demographics:</b> Age: 46.9% 51-64; 53.1% &gt;64 Gender: 61.9% female Race/Ethnicity: 41.2% white, 11.8% African American, 31.8% Asian, 5.7% other Income: NR Education: NR Insurance: 32.8% private, 61.5% public, 2.1% self-paid, 3.6% other Foreign-born status: NR Co-morbidity: NR Baseline screening: 59.7%</p>	<p><b>Outcome Measure:</b> Completion of any CRC tests 3 months after intervention ended</p> <p><b>How Ascertained:</b> EMR</p> <p><b>Follow-up Time:</b> 3 months after intervention ended 9 months after intervention started</p> <p><b>Results:</b></p> <p><b>Absolute effectiveness:</b></p> <table border="1" data-bbox="1402 565 1894 652"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 2:</td> <td>61.9%</td> <td>65.9%</td> <td>4 pct pts</td> </tr> <tr> <td>Control:</td> <td>54.6%</td> <td>57.1%</td> <td>2.5 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 1.5 pct pts (CI: -1.6, 4.6)</b></p> <p><b>Incremental effectiveness:</b> adding CR</p> <table border="1" data-bbox="1402 743 1894 831"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1:</td> <td>55.4%</td> <td>58.9%</td> <td>3.5 pct pts</td> </tr> <tr> <td>Arm 2:</td> <td>61.9%</td> <td>65.9%</td> <td>4 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 0.5 pct pts (CI: -2, 3)</b></p>		Pre	Post	Change	Arm 2:	61.9%	65.9%	4 pct pts	Control:	54.6%	57.1%	2.5 pct pts		Pre	Post	Change	Arm 1:	55.4%	58.9%	3.5 pct pts	Arm 2:	61.9%	65.9%	4 pct pts
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Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Potter et al., 2011</p> <p><b>Study Design:</b> Group non-RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Santa Clara, CA, US</p> <p><b>Setting:</b> KPNC’s Santa Clara Medical Center clinics</p> <p><b>Health System Factors:</b> Development of the FLUFIT program; use of EMR for screening outcomes</p> <p><b>Intervention Duration:</b> Oct 12<sup>th</sup> to Nov 21<sup>st</sup> in 2008</p> <p><b>Intervention Details:</b> colorectal cancer (any test, FIT, sigmoidoscopy, colonoscopy)</p> <p>Arm 1: RSB1 + RSB2 Comparison: usual care</p> <p>RSB1: alternative site for screening; FIT offered at sites for flu vaccination RSB2: modifying hours of service; program implemented on weekday evenings and Saturdays</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Patients visiting KPNC Santa Clara’s main campus for flu vaccine, not UTD with CRC screening, aged 50-80 years</p> <p><b>Sample Size:</b> 7465</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: mean age of 63.4 years Gender: 55.4% female Race/Ethnicity: 51% white, 1.7% African American, 18.8% Asian, 1.2% other, 11.3% Hispanic Income: NR Education: NR Insurance: 100% HMO Foreign-born status: NR Co-morbidity: NR Baseline screening: 0%</p>	<p><b>Outcome Measure:</b> 1. UTD with any tests at 90 days 2. Completion of FIT at 6 months 3. Flex sigmoidoscopy at 90 days 4. Colonoscopy at 90 days</p> <p><b>How Ascertained:</b> EMR</p> <p><b>Follow-up Time:</b> 90 days and 6 months after</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. UTD with any CRC tests: Arm 1: 31.4% Control: 15.4% <b>Difference: 16.0 pct pts, p&lt;0.0001</b></p> <p>2. FIT: Arm 1: 52.1% Control: 37.5% <b>Difference: 14.6 pct pts, p&lt;0.0001</b></p> <p>3. Flex sigmoidoscopy: Arm 1: 0.9% Control: 1.5% <b>Difference: -0.6 pct pts, p = 0.026</b></p> <p>4. Colonoscopy: Arm 1: 1.1% Control: 1.2% <b>Difference: -0.1 pct pts, p = 0.80</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Powe et al., 2004</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Southeast US</p> <p><b>Setting:</b> Community, senior center</p> <p><b>Health System Factors:</b> NR</p> <p><b>Intervention Duration:</b> 12 months, year not specified</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (FOBT)</p> <p>Arm 1: RSB Arm 2: RSB + high intensity SM Arm 3: RSB + low intensity SM</p> <p>RSB: mailed FOBT cards 12 months after baseline; FOBT kits to participants at senior centers High intensity SM: brochure mailed 9 months after baseline; flier received 12 months after baseline; posters in senior centers 6 months after baseline; 20 minute video; educational calendar mailed 1 month after video Low intensity SM: 20 minute video only at baseline</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> One of the 143 senior centers in a southeastern state, has not participated in previous CRC studies; Patients over 50 years of age, have not participated in previous CRC studies</p> <p><b>Sample Size:</b> 134</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: mean age of 73.8 years Gender: 88% female Race/Ethnicity: 16% white, 84% African American Income: 77% ≤ \$10,000; 23% &gt; \$10,000 Education: mean 8.8 years of education Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: 14%</p>	<p><b>Outcome Measure:</b> Return FOBT kit within 7 days</p> <p><b>How Ascertained:</b> Returned FOBT kits</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Incremental effectiveness:</b> Arm 1: 12.2% Arm 2: 61.1% Arm 3: 46.2%</p> <p><b>Differences:</b> Impact of <b>high intensity SM:</b> <b>Arm 2 vs. Arm 1: 48.9 pct pts (CI: 32.5, 65.3)</b> Impact of <b>low intensity SM:</b> <b>Arm 3 vs. Arm 1: 34.0 pct pts (15.4, 52.5)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Richards et al., 2011</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> New York, US</p> <p><b>Setting:</b> Community and clinic</p> <p><b>Health System Factors:</b> Direct Endoscopic Referral System was developed to streamline referral process</p> <p><b>Intervention Duration:</b> 2003-2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (colonoscopy)</p> <p>Arm 1: MM + SM + RSB1 + RSB2 + ROPC Comparison: before intervention</p> <p>MM: media campaigns focused on poor neighborhoods SM: reminder cards RSB1: scheduling assistance through patient navigators RSB2: reduced admin barrier through patient navigators ROPC: NYC Council funds up to 2,000 colonoscopies a year</p> <p><b>Presence of CHW/LHA/PN:</b> PN</p>	<p><b>Eligibility Criteria:</b> 2 independent cross-sectional samples of an annual, representative survey in NY in 2003 and 2007; CRC screening questions only asked to respondents ≥ 50 years</p> <p><b>Sample Size:</b> 2003: 9802 2007: 9554</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: NR Gender: NR Race/Ethnicity: NR Income: NR Education: NR Insurance: NR Foreign-born status: NR Co-morbidity: NR Baseline screening: 41.7%</p>	<p><b>Outcome Measure:</b> Colonoscopy completion within 10 years</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 60 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Pre: 41.7% Post: 61.7% <b>Change: 20 pct pts, p&lt;0.05</b></p>

Study	Intervention Characteristics	Population Characteristics	Results																																				
<p><b>Author, Year:</b> Roetzheim et al., 2005</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Florida, US</p> <p><b>Setting:</b> Primary care clinics</p> <p><b>Health System Factors:</b> Community health clinics participated in a country-funded health plan that provides healthcare to uninsured persons not qualifying for Medicaid or Medicare</p> <p><b>Intervention Duration:</b> NR</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and cervical cancers, colorectal cancer (FOBT)</p> <p>Arm 1: PR + PAF Comparison: usual care</p> <p>PR: Chart stickers and checklist used to help staff and providers to determine if patients were UTD on cancer screening PAF: Office staff and project staff jointly discussed intervention and how to improve implementation</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Clinic: provides primary care 5days/week, majority of staff agree to participate Patient: established patients aged 50-75 years; women with history of BC excluded</p> <p><b>Sample Size:</b> Baseline: 1196 Follow-up: 1237</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: 37% 50-56, 33% 57-63, 30% 64-75 Gender: 78.2% female Race/Ethnicity: 48.4% white, 29.1% African American, 22.5% Hispanic Income: NR Education: NR Insurance: 93.5% public insurance, 6.5% other Foreign-born status: NR Co-morbidity: 28.5% with 0-4 chronic conditions; 39.1% with 5-7 chronic conditions; 32.4% with 8+ chronic conditions Baseline screening: 59.8% UTD with Pap; 73.6% UTD with Mam; 29.0% UTD with FOBT</p>	<p><b>Outcome Measure:</b> Within 12 months prior to or 3 months after audited visit: 1. Completed MAM 2. Completed Pap 3. Completed FOBT</p> <p><b>How Ascertained:</b> Chart views</p> <p><b>Follow-up Time:</b> 24 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <p>1. MAM:</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1:</td> <td>71.4%</td> <td>67.0%</td> <td>-4.4 pct pts</td> </tr> <tr> <td>Control:</td> <td>75.9%</td> <td>64.5%</td> <td>-11.4 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 7.0 pct pts</b></p> <p>2. Pap:</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1:</td> <td>61.9%</td> <td>47.3%</td> <td>-14.6 pct pts</td> </tr> <tr> <td>Control:</td> <td>57.6%</td> <td>45.3%</td> <td>-12.3 pct pts</td> </tr> </tbody> </table> <p><b>Difference: -2.3 pct pts</b></p> <p>3. FOBT:</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1:</td> <td>35.9%</td> <td>28.2%</td> <td>-7.7 pct pts</td> </tr> <tr> <td>Control:</td> <td>22.1%</td> <td>12.6%</td> <td>-9.5 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 1.8 pct pts</b></p>		Pre	Post	Change	Arm 1:	71.4%	67.0%	-4.4 pct pts	Control:	75.9%	64.5%	-11.4 pct pts		Pre	Post	Change	Arm 1:	61.9%	47.3%	-14.6 pct pts	Control:	57.6%	45.3%	-12.3 pct pts		Pre	Post	Change	Arm 1:	35.9%	28.2%	-7.7 pct pts	Control:	22.1%	12.6%	-9.5 pct pts
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<p><b>Author, Year:</b> Ruffin &amp; Gorenflo, 2004</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Michigan, US</p> <p><b>Setting:</b> Health clinic</p> <p><b>Health System Factors:</b> Intervention implemented in health clinics</p> <p><b>Intervention Duration:</b> 1994-1998</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and cervical cancers, colorectal cancer (FOBT, FS)</p> <p>Arm 1: PAF Arm 2: PAF + PR Arm 3: PAF + CR Arm 4: PAF + PR + CR</p> <p>PR: patient’s screening history and current screening recommendations, most commonly presented through some type of prevention flow sheet with cues PAF: charts reviewed between practice and study PI and research associate CR: durable, wallet-sized record of patient’s prior screening and cues to future screening</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Clinic: non-specialized primary care clinic serving adults, with majority of providers agreeing to participate Patients: ≥50 years with no prior cancer diagnosis</p> <p><b>Sample Size:</b> 17248 charts from 22 practices</p> <p><b>Attrition:</b> 27% for practices</p> <p><b>Demographics:</b> Age: mean age of 54.3 years Gender: 51% female Race/Ethnicity: 59.3% white, 40.7% non-white Income: NR Education: NR Insurance: 36.3% HMO; 45.7% other private; 16% public; 2% not insured Foreign-born status: NR Co-morbidity: 33.8% with no chronic medical problems Baseline screening: please see results</p>	<p><b>Outcome Measure:</b> 1. MAM within 2 years 2. Pap within 3 years 3. FOBT within 2 years 4. Endoscopy (FS, colonoscopy) within 5 years</p> <p><b>How Ascertained:</b> Chart views</p> <p><b>Follow-up Time:</b> 36 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <p>1. MAM within 2 years:</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 2:</td> <td>58%</td> <td>49%</td> <td><b>-9 pct pts</b></td> </tr> <tr> <td>Arm 3:</td> <td>54%</td> <td>55%</td> <td><b>1 pct pts</b></td> </tr> <tr> <td>Arm 4:</td> <td>41%</td> <td>39%</td> <td><b>-2 pct pts</b></td> </tr> </tbody> </table> <p>2. Pap within 3 years:</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 2:</td> <td>71%</td> <td>61%</td> <td><b>-10 pct pts</b></td> </tr> <tr> <td>Arm 3:</td> <td>66%</td> <td>59%</td> <td><b>-7 pct pts</b></td> </tr> <tr> <td>Arm 4:</td> <td>55%</td> <td>50.8%</td> <td><b>-4.2 pct pts</b></td> </tr> </tbody> </table> <p>3. FOBT within 2 years:</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 2:</td> <td>35%</td> <td>24%</td> <td><b>-11 pct pts</b></td> </tr> <tr> <td>Arm 3:</td> <td>38%</td> <td>34%</td> <td><b>-4 pct pts</b></td> </tr> <tr> <td>Arm 4:</td> <td>31%</td> <td>33.5%</td> <td><b>2.5 pct pts</b></td> </tr> </tbody> </table> <p>4. Endoscopy (FS, colonoscopy) within 5 years:</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 2:</td> <td>16%</td> <td>13.5%</td> <td><b>-2.5 pct pts</b></td> </tr> <tr> <td>Arm 3:</td> <td>16%</td> <td>16%</td> <td><b>0 pct pts</b></td> </tr> <tr> <td>Arm 4:</td> <td>10%</td> <td>8%</td> <td><b>-2 pct pts</b></td> </tr> </tbody> </table> <p><b>Incremental effectiveness:</b> 1. MAM within 2 years: Arm 1 change: -4 pct pts</p> <p><b>Differences:</b> Arm 2 vs. Arm 1, impact of PR: <b>-5 pct pts</b></p>		Pre	Post	Change	Arm 2:	58%	49%	<b>-9 pct pts</b>	Arm 3:	54%	55%	<b>1 pct pts</b>	Arm 4:	41%	39%	<b>-2 pct pts</b>		Pre	Post	Change	Arm 2:	71%	61%	<b>-10 pct pts</b>	Arm 3:	66%	59%	<b>-7 pct pts</b>	Arm 4:	55%	50.8%	<b>-4.2 pct pts</b>		Pre	Post	Change	Arm 2:	35%	24%	<b>-11 pct pts</b>	Arm 3:	38%	34%	<b>-4 pct pts</b>	Arm 4:	31%	33.5%	<b>2.5 pct pts</b>		Pre	Post	Change	Arm 2:	16%	13.5%	<b>-2.5 pct pts</b>	Arm 3:	16%	16%	<b>0 pct pts</b>	Arm 4:	10%	8%	<b>-2 pct pts</b>
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Study	Intervention Characteristics	Population Characteristics	Results
			<p>Arm 3 vs. Arm 1, impact of CR:  <b>5 pct pts</b></p> <p>Arm 4 vs. Arm 1, impact of PR + CR:  <b>2 pct pts</b></p> <p>2. Pap within 3 years:                      Arm 1 change: -3.8 pct pts  <b>Differences:</b>                      Arm 2 vs. Arm 1, impact of PR:  <b>-6.2 pct pts</b>                      Arm 3 vs. Arm 1, impact of CR:  <b>-3.2 pct pts</b>                      Arm 4 vs. Arm 1, impact of PR + CR:  <b>-0.4 pct pts</b></p> <p>3. FOBT within 2 years:                      Arm 1 change: 2.5 pct pts  <b>Differences:</b>                      Arm 2 vs. Arm 1, impact of PR:  <b>-13.5 pct pts</b>                      Arm 3 vs. Arm 1, impact of CR:  <b>-6.5 pct pts</b>                      Arm 4 vs. Arm 1, impact of PR + CR:  <b>0 pct pts</b></p> <p>4. Endoscopy(FS, colonoscopy) within 5 years:                      Arm 1 change: -2.1 pct pts  <b>Differences:</b>                      Arm 2 vs. Arm 1, impact of PR:  <b>-0.4 pct pts</b>                      Arm 3 vs. Arm 1, impact of CR:  <b>2.1 pct pts</b>                      Arm 4 vs. Arm 1, impact of PR + CR:  <b>0.1 pct pts</b></p>

Study	Intervention Characteristics	Population Characteristics	Results												
<p><b>Author, Year:</b> Suaia et al., 2007</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Colorado, US</p> <p><b>Setting:</b> Community church</p> <p><b>Health System Factors:</b> Insurance coverage included Medicare, Medicaid, and HMOs</p> <p><b>Intervention Duration:</b> March 2000 to 2005</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: OE + GE1 + SM Arm 2: GE2 + SM</p> <p>OE: face-to-face education given by promotoras GE1: promotoras provided information about screening during church services GE2: pulpit announcements during church services providing information on screening SM: brochure, pamphlet, newsletter, and a display unit for churches</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Women aged 50-69 years, continuously enrolled in an insurance plan for longer than 23 months</p> <p><b>Sample Size:</b> 8439</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: at follow up, 23.6% 50-54, 25.8% 55-59, 24.4% 60-64, 26.2% 65-69 Gender: 100% female Race/Ethnicity: 90% white, 11% Hispanic Income: at follow-up, 36.9% ≤\$38317, 26.5% &lt;\$45581, 21.5% &lt;\$58937, 15.1% &gt;\$58937 Education: NR Insurance: at follow-up, 52.3% private, 47.1% public Foreign-born status: NR Co-morbidity: at follow-up, 10.7% with comorbidity Baseline screening: NR</p>	<p><b>Outcome Measure:</b> Biennial MAM</p> <p><b>How Ascertained:</b> Claims codes</p> <p><b>Follow-up Time:</b> 24 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm 1:</td> <td style="text-align: center;">59%</td> <td style="text-align: center;">60.8%</td> </tr> </table> <p><b>Change: 1.9 pct pts (CI: -3.8, 7.6)</b></p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Pre</td> <td style="text-align: center;">Post</td> </tr> <tr> <td>Arm 2:</td> <td style="text-align: center;">58.1%</td> <td style="text-align: center;">58.5%</td> </tr> </table> <p><b>Change: 0.4 pct pts (CI: -1.5, 2.3)</b></p>		Pre	Post	Arm 1:	59%	60.8%		Pre	Post	Arm 2:	58.1%	58.5%
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Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Sequist et al., 2009</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Massachusetts, US</p> <p><b>Setting:</b> Multi-specialty group practice</p> <p><b>Health System Factors:</b> EMR</p> <p><b>Intervention Duration:</b> April 2006 to June 2007</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: PR Arm 2: RSB Arm 3: PR + RSB Comparison: usual care</p> <p>PR: passive and active alerts in patient’s electronic chart RSB: patients overdue for CRC screening received FOBT kit</p> <p><b>Presence of CHW/LHA/PN:</b> Other Deliverer</p>	<p><b>Eligibility Criteria:</b> Patients aged 50-80 and visited one of the PCPs at 11 health care clinics included in the study during prior 18 months</p> <p><b>Sample Size:</b> 21860</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: mean age of 60.5 years Gender: 56.9% female Race/Ethnicity: 57.7% white, 8.4% African American, 2.5% Asian, 2.6% other, 1.7% Hispanic Income: median household income of \$50,376 Education: 87.1% high school graduate Insurance: 68.5% private, 27.5% public, 4% self-pay Foreign-born status: NR Co-morbidity: NR Baseline screening: 0%</p>	<p><b>Outcome Measure:</b> Completion of colorectal cancer screening by FOBT, FS, or colonoscopy</p> <p><b>How Ascertained:</b> EMR</p> <p><b>Follow-up Time:</b> 15 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 3: 44.2% Control: 36.7% <b>Difference: 7.5 pct pts</b></p> <p><b>Incremental effectiveness:</b> Arm 1: 39.6% Arm 2: 43.7% Arm 3: 44.2%</p> <p><b>Differences:</b> Arm 3 vs. Arm 1, impact of RSB: <b>4.6 pct pts</b> Arm 3 vs. Arm 2, impact of PR: <b>0.5 pct pts</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Sequist et al., 2011</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Massachusetts, US</p> <p><b>Setting:</b> Multi-specialty group practice composed of 14 ambulatory health centers</p> <p><b>Health System Factors:</b> EMR</p> <p><b>Intervention Duration:</b> Nov 2009 to Mar 2010</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test)</p> <p>Arm 1: CR + RSB Comparison: usual care</p> <p>CR: personalized electronic message from PCP RSB: reduced admin barrier by sending FOBT kit to homes</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Patients aged 50 to 75 years who visited one of the PCPs included in the study during the prior 18 months, with an active electronic health record account</p> <p><b>Sample Size:</b> 1103</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: mean age of 56.3 years Gender: 61.2% Race/Ethnicity: 77.3% white, 4.1% African American, 4.2% Asian, 1.6% other, 1.8% Hispanic Income: NR Education: NR Insurance: 81.2% private, 16.6% private, 2.2% self-pay Foreign-born status: NR Co-morbidity: NR Baseline screening: 0%</p>	<p><b>Outcome Measure:</b> Completion of any appropriate colorectal cancer screening</p> <p><b>How Ascertained:</b> EHR</p> <p><b>Follow-up Time:</b> 4 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 15.8% Control: 13.1% <b>Difference: 2.7 pct pts (CI: -1.3, 6.7)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Slater et al., 2005</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Minnesota, US</p> <p><b>Setting:</b> Home</p> <p><b>Health System Factors:</b> Only uninsured/underinsured eligible for study</p> <p><b>Intervention Duration:</b> May to July 2000</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: SM + RSB Arm 2: SM + RSB + CI Comparison: usual care</p> <p>SM: occasional print and broadcast media RSB: assistance with appointment scheduling CI: monetary incentive</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Women 40-63 year eligible for Sage Screening Program (NBCCEDP in MN), household income at or below 250% FPL, uninsured or underinsured</p> <p><b>Sample Size:</b> 145467</p> <p><b>Attrition:</b> NR</p> <p><b>Demographics:</b> Age: mean age of 49.7 years Gender: 100% female Race/Ethnicity: NR Income: &lt;15000 6.9%; 15000-24999 13.2%; 25000-34999 27.8%; 35000-49999 52.1% Education: NR Insurance: 100% uninsured or underinsured Foreign-born status: NR Co-morbidity: NR Baseline screening: NR</p>	<p><b>Outcome Measure:</b> MAM within 1 year</p> <p><b>How Ascertained:</b> Screening program records: NBCCEDP</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 232/11513 = 2.02% Arm 2: 313/11513 = 2.72% <b>Difference: 0.70 pct pts (0.3, 1.1)</b></p> <p>Arm 3: 110/14120 = 0.78% Arm 4: 174/14120 = 1.23% <b>Difference: 0.46 pct pts (0.2, 0.7)</b></p> <p>Pooled Arm 1 Pooled Arm 2 <b>Difference: 0.52 pct pts (0.32, 0.72)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Studts 2012</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Kentucky, US</p> <p><b>Setting:</b> Community (29 faith-based institutions)</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> Dec 2005 to June 2008</p> <p><b>Intervention Details:</b> Type of cancer addressed: cervical cancer</p> <p>Arm 1: GE Arm 2: GE + OE</p> <p>GE: all participants received an educational lunch program at the church OE: addressed each of the participant’s identified barriers to screening in an home visit</p> <p><b>Presence of CHW/LHA/PN:</b> CHW LHAs were residents, demographically similar to participants, had no professional health care background.</p>	<p><b>Eligibility Criteria:</b> Aged 40-64, speak English, and outside ACS guidelines at time of CC screening (no Pap within prior 12 months).</p> <p><b>Sample Size:</b> 345</p> <p><b>Attrition:</b> 4.1%</p> <p><b>Demographics:</b> Age: 20% 40-44, 20% 45-49, 23.8% 50-54, 22.9% 55-59, 13.3% 60-64 Gender: 100% female Race/Ethnicity: 95.1% white, 4.6% African American, 0.3% American Indian Income: 24.6% &lt;10,000, 30.7% 10-30,000, 19.1% &gt;30,000 Education: 25.7% &lt;HS, 39.5% HS/GED, 23.1% Some college, 11.7% &gt;College graduate Insurance: 40.3% private, 27.5% public, 32.2% none Foreign-born status: NR Co-morbidity: 44.6% poor/fair, 36.8% good (Perceived health status) Baseline screening: 0% baseline</p>	<p><b>Outcome Measure:</b> Receipt of Pap test</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 8 months</p> <p><b>Results:</b> <b>Incremental effectiveness:</b> adding OE Arm 1: 19/169 = 11.2% Arm 2: 31/176 = 17.6% <b>Difference: 6.4 pct pts (-1.0, 13.7)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results																																																																								
<p><b>Author, Year:</b> Tanjasiri 2008</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> California, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> NR</p> <p><b>Intervention Duration:</b> Middle of 2002–2003</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: GE + OE + CR Comparison: usual care</p> <p>GE: LHA shared information about breast health and breast cancer screening. OE: Pink fabric ribbons educational message for each woman CR: Reminder cards that were given to women each year</p> <p><b>Presence of CHW/LHA/PN:</b> CHW Training of women from the Chamorro community to become lay leaders in the outreach and education of women in their social networks for breast health</p>	<p><b>Eligibility Criteria:</b> Chamorro women ≥50 years in LA and Orange counties, CA. Women in Alameda, Solano and SC counties served as controls.</p> <p><b>Sample Size:</b> 404</p> <p><b>Attrition:</b> 26.5%</p> <p><b>Demographics:</b></p> <table border="1" data-bbox="930 532 1394 1295"> <thead> <tr> <th></th> <th>Int.</th> <th>Control</th> </tr> </thead> <tbody> <tr> <td>Age:</td> <td></td> <td></td> </tr> <tr> <td>50-59:</td> <td>50.7%</td> <td>35.5%</td> </tr> <tr> <td>60-69:</td> <td>25.0%</td> <td>44.7%</td> </tr> <tr> <td>70+:</td> <td>24.3%</td> <td>19.7%</td> </tr> <tr> <td>Gender: 100% female</td> <td></td> <td></td> </tr> <tr> <td>Race/Ethnicity: 100% Chamorro</td> <td></td> <td></td> </tr> <tr> <td>Income, % ≤ FPL:</td> <td></td> <td></td> </tr> <tr> <td></td> <td>13.6%</td> <td>9.2%</td> </tr> <tr> <td>Education:</td> <td></td> <td></td> </tr> <tr> <td>Mean years (SD) of US education</td> <td></td> <td></td> </tr> <tr> <td></td> <td>10.76 (3.2)</td> <td>2.83 (4.4)</td> </tr> <tr> <td>Mean years (SD) of Guam education</td> <td></td> <td></td> </tr> <tr> <td></td> <td>2.31 (4.5)</td> <td>10.87 (2.7)</td> </tr> <tr> <td>Insurance:</td> <td></td> <td></td> </tr> <tr> <td>Private/military</td> <td></td> <td></td> </tr> <tr> <td></td> <td>67.2%</td> <td>62.9%</td> </tr> <tr> <td>MediCal</td> <td>2.6%</td> <td>0.8%</td> </tr> <tr> <td>Medicare</td> <td>30.2%</td> <td>36.3%</td> </tr> <tr> <td>None:</td> <td>4.9%</td> <td>1.3%</td> </tr> <tr> <td>Foreign-born status: % born in Guam/Commonwealth of the Northern Mariana Islands</td> <td></td> <td></td> </tr> <tr> <td></td> <td>98.6%</td> <td>96.7%</td> </tr> <tr> <td>Co-morbidity: NR</td> <td></td> <td></td> </tr> <tr> <td>Baseline screening: NR</td> <td></td> <td></td> </tr> </tbody> </table>		Int.	Control	Age:			50-59:	50.7%	35.5%	60-69:	25.0%	44.7%	70+:	24.3%	19.7%	Gender: 100% female			Race/Ethnicity: 100% Chamorro			Income, % ≤ FPL:				13.6%	9.2%	Education:			Mean years (SD) of US education				10.76 (3.2)	2.83 (4.4)	Mean years (SD) of Guam education				2.31 (4.5)	10.87 (2.7)	Insurance:			Private/military				67.2%	62.9%	MediCal	2.6%	0.8%	Medicare	30.2%	36.3%	None:	4.9%	1.3%	Foreign-born status: % born in Guam/Commonwealth of the Northern Mariana Islands				98.6%	96.7%	Co-morbidity: NR			Baseline screening: NR			<p><b>Outcome Measure:</b> MAM within 1 year</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> Authors reported that there were no significant changes in women's breast cancer.</p>
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<p><b>Author, Year:</b> Thompson 2006</p> <p><b>Study Design:</b> Group RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Good</p>	<p><b>Location:</b> Washington, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> 2003 - 2005</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and cervical cancers, colorectal cancer (FOBT, flex sig/colonoscopy)</p> <p>Arm 1: SM + GE + OE + RSB + ROPC Comparison 1: usual care</p> <p>SM: worksite distributed materials GE: educational presentation at health fairs and block parties OE: promotoras were trained to talk with individuals RSB: alternative screening site via wellness vans ROPC: local clinics provided free or reduced cost of screening.</p> <p><b>Presence of CHW/LHA/PN:</b> CHW 10 volunteer promotoras of Mexican ancestry</p>	<p><b>Eligibility Criteria:</b> Adults 18+ who lived in the household for at least the past week and were able to response, and who lived in 1 of 20 communities in lower Yakima valley</p> <p><b>Sample Size:</b> 1,962</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: 18-39: 43.4%; 40-49: 20.0%; 50-64: 19.9%; 65+: 16.7% Gender: male 44.8%; female 55.2% Race/Ethnicity: white 47.81%; Hispanics 46.79% Income: ≤\$15,000: 36.4%; \$15,000-\$35,000: 37.7%; &gt;\$35,000: 25.9% Education: &lt;HS: 49.2%; HS: 22.3%; ≥some coll: 28.5% Insurance: private 45.6%; public 32.7%; 21.7% Foreign-born status: NR Co-morbidity: NR Baseline screening: NR</p>	<p><b>Outcome Measure:</b> 1. MAM within 2 years 2. Pap within 3 years 3. FOBT within 2 years 4. Flex Sig/Colonoscopy within 5 years</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 30 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> 1. MAM within 2 years <b>Hispanic women age 40-49</b> Arm 1: 80.6% Control: 88.3% <b>Difference: -7.7 pct pts, p=0.44</b></p> <p><b>White women age 40-49</b> Arm 1: 90.59% Control: 89.7% <b>Difference: 0.8 pct pts, p=0.9</b></p> <p><b>Hispanic women age 50+</b> Arm 1: 73.39% Control: 73.5% <b>Difference: -0.2 pct pts, p=0.99</b></p> <p><b>White women aged 50+</b> Arm 1: 75.4% Control: 70.2% <b>Difference: 5.2 pct pts, p=0.34</b></p> <p>2. Pap within 3 years <b>Hispanic women</b> Arm 1: 94.2% Control: 93.7% <b>Difference: 0.5 pct pts, p=0.83</b> <b>White women</b> Arm 1: 80.4%</p>
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Study	Intervention Characteristics	Population Characteristics	Results
			<p>Control: 88.2%  <b>Difference: -7.8 pct pts, p=0.02</b></p> <p>3. FOBT within 2 years  <b>Hispanic women</b>                      Control: 52.8%</p> <p><b>White women</b>                      Arm 1: 48.2%                      Control: 48.6%  <b>Difference: -0.4 pct pts (-6.8, 6), p=0.94</b></p> <p>4. Flex Sig/Colonoscopy within 5 years  <b>Hispanic women</b>                      Arm 1: 83.9%                      Control: 69.7%  <b>Difference: 14.2 pct pts (8.8, 19.6), p=0.24</b></p> <p><b>White women</b>                      Arm 1: 77.4%                      Control: 79.8%  <b>Difference: -2.4 pct pts (-7.7, 2.9), p=0.66</b></p>

Study	Intervention Characteristics	Population Characteristics	Results																								
<p><b>Author, Year:</b> Walsh 2010</p> <p><b>Study Design:</b> Individual RCT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> California, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> 2005-2009</p> <p><b>Intervention Details:</b> Type of cancer addressed: colorectal cancer (any test, FOBT)</p> <p>Arm 1: RSB + SM Arm 2: RSB + SM + OE</p> <p>RSB: Mailed FOBT kit plus culturally tailored brochures SM: bilingual culturally tailored brochures OE: Telephone counseling</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Participants were Vietnamese and Latino male and female patients at one of the five SCVMC primary care satellite sites. Vietnamese or Latino patients aged 50 –79 years with no history of cancer. Exclusion criteria included dementia or any condition (e.g., terminal illness) for which the primary care physician deemed the patient ineligible for CRC screening.</p> <p><b>Sample Size:</b> 1,789</p> <p><b>Attrition:</b> 24%</p> <p><b>Demographics:</b> Age: mean age 60.58 years Gender: male 30.7%; 69.3% Race/Ethnicity: Asian 44.3%; Hispanics 55.7% Income: &lt;20,000: 57.1%; &gt;20,000: 12%; NR: 30.9% Education: years of education ≤6: 55.8%; 7-12: 24.4%; ≥13: 19.8% Insurance: NR Foreign-born status: 88% Co-morbidity: Self-rated health Excellent/very good: 4.7%; Good: 18.5%; Fair: 52.4%; Poor: 21.6% Baseline screening: FOBT in past year: 46.2%; Sig in 5/ Col in 10: 32.2%</p>	<p><b>Outcome Measure:</b> 1. Up-to-date with FOBT 2. Up-to-date with Any CRC</p> <p><b>How Ascertained:</b> Self-report</p> <p><b>Follow-up Time:</b> 9-12 months</p> <p><b>Results:</b> <b>Incremental effectiveness:</b> adding OE</p> <p>1. FOBT</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>45%</td> <td>60%</td> <td>15.1 pct pts</td> </tr> <tr> <td>Arm 2</td> <td>45%</td> <td>70%</td> <td>25.1 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 10 pct pts (4.6, 15.5), p&lt;0.001</b></p> <p>2. Any CRC</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>65%</td> <td>77%</td> <td>11.9 pct pts</td> </tr> <tr> <td>Arm 2</td> <td>60%</td> <td>82%</td> <td>21.4 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 9.5 pct pts (4.8, 14.2), p&lt;0.001</b></p>		Pre	Post	Change	Arm 1	45%	60%	15.1 pct pts	Arm 2	45%	70%	25.1 pct pts		Pre	Post	Change	Arm 1	65%	77%	11.9 pct pts	Arm 2	60%	82%	21.4 pct pts
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Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Wang 2010</p> <p><b>Study Design:</b> Group NRT</p> <p><b>Suitability of Design:</b> Greatest</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> New York, US</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> NR</p> <p><b>Intervention Duration:</b>NR</p> <p><b>Intervention Details:</b> Type of cancer addressed: cervical cancer</p> <p>Arm 1: GE + RBS1 + RSB2 + RSB3 + RSB4 Comparison: General Education</p> <p>RSB1: patient navigation assistance in arranging Pap test appointments RSB2: language translation RSB3: transportation assistance RSB4: assistance with paperwork for obtaining free or low-cost screening</p> <p><b>Presence of CHW/LHA/PN:</b> CHW</p>	<p><b>Eligibility Criteria:</b> Exclusion criteria included &lt;18 years of age, a current diagnosis of cervical cancer, and a Pap test within the past 12 months. Chinese women were recruited from 4 Asian community-based organizations.</p> <p><b>Sample Size:</b> 134</p> <p><b>Attrition:</b> 6.72%</p> <p><b>Demographics:</b> Age: mean age of 54.6 years Gender: female 100% Race/Ethnicity: Asian 100% Income: NR Education: &lt;11 years: 40.0%; 12 years: 34.5%; 12+ years: 25.6%; Insurance: Other (Any 61.8%) Foreign-born status: Years in US: 13.4 Co-morbidity: NR Baseline screening: no PAP in prior year</p>	<p><b>Outcome Measure:</b> Receipt of a PAP smear in past year</p> <p><b>How Ascertained:</b> Self-report and verification of screening from medical</p> <p><b>Follow-up Time:</b> 12 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b> Arm 1: 56/80=70% Control: 6/54 = 11.1% <b>Difference: 58.9 pct pts (45.8, 72)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results
<p><b>Author, Year:</b> Wee 2012</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Singapore</p> <p><b>Setting:</b> Community</p> <p><b>Health System Factors:</b> N/A</p> <p><b>Intervention Duration:</b> Jan 2009 to May 2011</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast and cervical cancers, colorectal cancer (FOBT)</p> <p>Arm 1: ROPC + RSB1 + CR</p> <p>ROPC: Services were offered free of charge RSB1: alternative screening sites: FOBT kits were distributed in residents' homes and pap smears/mammograms were brought into the community by specially equipped mobile vans CR: Interviewers went door-to-door collecting baseline demographic information from residents</p> <p><b>Presence of CHW/LHA/PN:</b> No</p>	<p><b>Eligibility Criteria:</b> Singaporean citizen or permanent resident, aged ≥40. Excluded those with self-reported history of any cancer.</p> <p><b>Sample Size:</b> 1,081</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: 40 to &lt;50: 23.8%; 50 to &lt;60: 27.8%; 60 to &lt;70: 17.8%; ≥70: 30.6% Gender: male 42.4%; female 57.6% Race/Ethnicity: Asian 100% Income: Monthly HH income: ≤\$500: 36.7%; \$500-\$1500: 36.6%; &gt;\$1500: 26.6 Education: Primary: 53.1%; Secondary: 30.1%; Tertiary: 16.8% Insurance: Universal healthcare Foreign-born status: NR Co-morbidity: NR Baseline screening: CRC:12.0%; CC: 31.3%; BC: 15.1%</p>	<p><b>Outcome Measure:</b> 1. Uptake of breast cancer screening 2. Uptake of cervical cancer screening 3. Update of colorectal cancer screening</p> <p><b>How Ascertained:</b> Self-Report for baseline; unclear for f/u</p> <p><b>Follow-up Time:</b> 6 months</p> <p><b>Results:</b> <b>Absolute effectiveness:</b></p> <p>1. MAM Arm 1 Pre: 94/623=15.1% Post: 107/623= 68% <b>Change: 2.1 pct pts (-2, 6.2)</b></p> <p>2. PAP Arm 2 Pre: 137/438=31.3% Post: 160/438=36.5% <b>Change: 5.3 pct pts (-1, 11.5)</b></p> <p>3. CRC, FOBT Arm 2 Pre: 99/824= 12% Post: 193/824= 23.4% <b>Change: 11.4 pct pts (7.8, 15.1)</b></p>

Study	Intervention Characteristics	Population Characteristics	Results																					
<p><b>Author, Year:</b> Wilf-Miron 2010</p> <p><b>Study Design:</b> Pre-post</p> <p><b>Suitability of Design:</b> Least</p> <p><b>Quality of Execution:</b> Fair</p>	<p><b>Location:</b> Israel</p> <p><b>Setting:</b> Community, Clinical</p> <p><b>Health System Factors:</b> Universal healthcare system; derived data from operational database</p> <p><b>Intervention Duration:</b> September 2004 to December 2005</p> <p><b>Intervention Details:</b> Type of cancer addressed: breast cancer</p> <p>Arm 1: CR(f/u call) + PR + PAF Arm 2: Arm 1 + OE + RSB1 + RSB2</p> <p>CR: computerized post card reminders. Non-respondents were contacted by phone PR: computerized reminder in the presence of a female nurse PAF: physician examination OE: nurse went door to door to convince women to participate in the program RSB1: Local branch staff organized group transportation to the screening facility for branch members. RSB2:</p> <p><b>Presence of CHW/LHA/PN:</b> Clinician educator</p>	<p><b>Eligibility Criteria:</b> Women aged 52 to 74 who had received at least one BC screening during the last 2 years and were patients at one of the local clinic branches.</p> <p><b>Sample Size:</b> 133,372</p> <p><b>Attrition:</b> N/A</p> <p><b>Demographics:</b> Age: mean age 60.42 years Gender: female 100% Race/Ethnicity: NR Income: NR Education: NR Insurance: public 100% Foreign-born status: NR Co-morbidity: NR Baseline screening: intervention: 26.7%; comparison: 49.0%</p>	<p><b>Outcome Measure:</b> MAM within 15 months</p> <p><b>How Ascertained:</b> Medical Records</p> <p><b>Follow-up Time:</b> 15 months</p> <p><b>Results:</b></p> <p><b>Absolute effectiveness:</b></p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>49.0%</td> <td>63.1%</td> </tr> <tr> <td>Arm 2</td> <td>26.7%</td> <td>46.2%</td> </tr> </tbody> </table> <p><b>Change: 14.1 pct pts</b></p> <p><b>Change: 19.4 pct pts</b></p> <p><b>Incremental effectiveness:</b> adding OE, RSB1, and RSB2</p> <table border="1"> <thead> <tr> <th></th> <th>Pre</th> <th>Post</th> <th>Change</th> </tr> </thead> <tbody> <tr> <td>Arm 1</td> <td>48.9%</td> <td>63.1%</td> <td>14.1pct pts</td> </tr> <tr> <td>Arm 2</td> <td>26.7%</td> <td>46.2%</td> <td>19.5 pct pts</td> </tr> </tbody> </table> <p><b>Difference: 5.4 pct</b></p>		Pre	Post	Arm 1	49.0%	63.1%	Arm 2	26.7%	46.2%		Pre	Post	Change	Arm 1	48.9%	63.1%	14.1pct pts	Arm 2	26.7%	46.2%	19.5 pct pts
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