

# 2021

## **Cancer Survivorship E-Learning Series Annual Report**





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#### **Acknowledgments**

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#### Introduction

The Cancer Survivorship E-Learning Series (E-Learning Series) was launched in 2013. The online training is a self-paced, 10-module continuing education program available to health care professionals at no cost. The modules in the E-Learning Series cover the following areas:

Module 1: Overview of key components of cancer survivorship care, national efforts to address the needs of cancer survivors, health disparities in care, and health status among cancer survivors.

Module 2: Overview of common long-term and late effects of cancer and its treatment.

Module 3: In-depth look at the psychosocial impact of cancer and recommendations on how to support the psychosocial needs of cancer survivors.

Module 4: Prevention and wellness in cancer survivorship care and role of the primary care providers in supporting cancer survivors to make lifestyle changes.

Module 5: Survivorship care coordination, the use of survivorship care plans as a communication tool, and the role of oncologists and primary care providers in post-treatment care.

Module 5 Companion: A framework and tools to help clinicians and health care organizations measure patient-reported priorities to inform quality cancer survivorship care.

Module 6: The role of rehabilitation in post-treatment care and the importance of spirituality and interventions to support cancer survivors.

The E-Learning Series modules are routinely updated to ensure that they are informed by current evidence. In 2021, the GW Cancer Center, in collaboration with subject matter experts, updated Module 4, which focuses on health and wellness in cancer survivorship. Appendix A provides a list of all E-Learning Series modules and their respective learning objectives.

#### **Archived modules**

Modules 7 - 10: Overview of long-term and late effects specific to prostate, colorectal, breast, and head and neck cancers and their treatment. Introduction to ACS Cancer Survivorship Care Guidelines and recommendations on using the guidelines in practice. These modules have been archived, because they are older than 5 years. However, they are still accessible on our platform with no continuing education (CE) credits awarded upon completion.

#### **Methods**

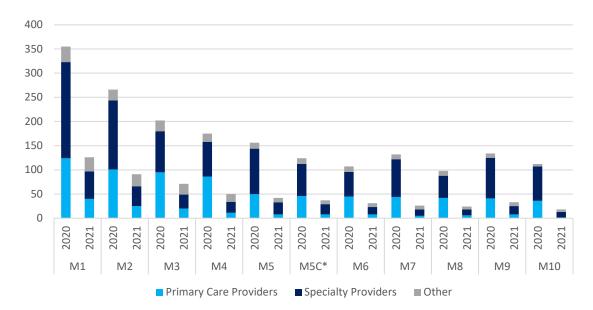
These data were collected from learners who completed at least one E-Learning Series module between January 1, 2021, and December 31, 2021. The learners who enrolled in at least one module, but did not complete it by December 31, 2021, were excluded from the analysis. The statistical analyses were conducted using IBM SPSS Statistics software (Version 26). The data was stratified based on learners' occupation, such as primary care providers (e.g., gynecology, family medicine, internal medicine, etc.), specialty providers (e.g., oncology, surgery, etc.), and other professions (health educators, volunteers, etc.). In addition, the data was also stratified by the geographical location (state, tribe, or territory).

If your state, tribe, territory, or country is not included in this report, or you have questions, please contact the GW Cancer Center (<u>cancercontrol@gwu.edu</u>).

Due to a technical issue in the learning management system between March and May 2021, the system failed to capture some of the learners' demographic data. This issue has since been resolved and data from May 26<sup>th</sup> onward were captured in their entirety. As a result, data included in this report excludes learners unable to be matched to their appropriate states, tribes, or territories during that period (n=46).

#### Results

The figure below represents the number of learners who completed the E-Learning Series modules in 2020 and 2021 based on their occupation.





The maps below display the total number of unique learners who completed at least one module in 2020 compared to 2021 by geography. This year we had three learners from the Marshall Islands and seven learners from outside of the United States.



<sup>\*</sup>Module 5 Companion: Advancing Patient-Centered Cancer Survivorship Care

Tables 1 and 2 present data based on each module completed.

State/Territory*		Module	e 1		Module	e 2		Module	e 3		Module	e 4		Module	e 5
· · · · · · · · · · · · · · · · · · ·	РСР	SP	Other												
Alabama	0	1	1	0	0	1	0	0	1	0	0	0	0	0	0
Alaska	0	2	0	0	1	0	0	1	0	0	1	0	0	1	0
California	16	7	4	8	4	2	12	2	3	5	1	1	4	2	1
Florida	0	3	0	0	3	0	0	3	0	0	1	0	0	3	0
Georgia	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Idaho	1	1	0	0	1	0	0	0	0	0	0	0	0	0	0
Illinois	0	1	1	0	1	0	0	0	0	0	0	0	0	0	0
Indiana	0	1	0	0	1	0	0	1	0	0	1	0	0	1	0
lowa	0	0	1	0	0	1	0	0	1	0	0	1	0	0	1
Kansas	5	3	5	5	3	6	4	3	6	4	3	5	1	0	1
Louisiana	0	1	1	0	1	1	0	1	1	0	1	1	0	1	0
Marshall Islands	1	0	0	1	0	0	1	0	0	1	0	0	1	0	0
Maryland	0	2	0	0	2	0	0	0	0	0	0	0	0	1	0
Massachusetts	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0
Michigan	8	1	1	6	1	1	0	0	0	0	0	0	0	0	0
Minnesota	0	2	0	0	2	0	0	2	0	0	2	0	0	2	0
Missouri	0	0	2	0	0	2	0	0	2	0	0	2	0	0	0
Nebraska	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0
New Hampshire	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
New Jersey	1	1	3	1	1	2	0	1	2	0	0	2	1	1	2
New York	2	5	1	1	3	1	1	2	1	0	2	0	1	0	0
North Carolina	0	3	0	0	3	0	0	3	0	0	3	0	0	3	0
Ohio	0	2	0	0	2	0	0	1	0	0	1	0	0	1	0
Oklahoma	0	2	1	0	1	1	0	1	1	0	1	0	0	1	1
Pennsylvania	0	0	2	0	1	2	0	0	2	0	0	2	0	1	1
South Dakota	1	0	0	1	0	0	1	0	0	0	0	0	0	0	0
Tennessee	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Texas	0	5	2	0	4	3	0	3	1	0	2	1	0	2	1
Utah	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0
Virginia	0	4	1	0	1	1	0	1	1	0	1	1	0	1	1
Washington	1	1	0	0	1	0	0	1	0	0	0	0	0	1	0
Wisconsin	0	2	0	0	1	0	0	1	0	0	1	0	0	1	0
				-											
Total * No learners from tribes	37	54	27	24	39	24	19	27	22	10	21	16	8	23	9

#### Table 1. 2021 Stratified Demographics by Primary Care (PCP), Specialty Provider (SP), or Other Professions (Modules 1 - 5)

\* No learners from tribes

# Table 2. 2021 Stratified Demographics by Primary Care (PCP), Specialty Provider (SP), or Other Professions (Modules 5Companion - 10)

State/Territory*	с	Modul ompani	e 5 ion**	Module 6			Module 7		Module 8			Module 9			Module 10			
	РСР	SP	Other	РСР	SP	Other	РСР	SP	Other	РСР	SP	Other	РСР	SP	Other	РСР	SP	Other
Alabama	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Alaska	0	1	0	0	1	0	0	1	0	0	1	0	0	1	0	0	1	0
California	5	2	1	5	1	0	1	0	0	5	1	0	7	1	1	0	1	0
Florida	0	2	0	0	2	0	0	3	0	0	2	0	0	3	0	0	3	0
Georgia	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Idaho	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Illinois	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Indiana	0	1	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0
lowa	0	0	1	0	0	1	0	0	1	0	0	1	0	0	1	0	0	0
Kansas	1	0	1	1	0	1	1	0	1	0	0	1	0	0	1	0	0	1
Louisiana	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0
Marshall Islands	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Maryland	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Massachusetts	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Michigan	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0
Minnesota	0	2	0	0	2	0	0	1	0	0	1	0	0	1	0	0	1	0
Missouri	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nebraska	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
New Hampshire	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
New Jersey	0	0	2	1	0	2	1	0	2	0	1	1	0	0	2	0	0	2
New York	1	0	0	1	0	0	1	0	0	1	0	0	1	0	0	1	0	0
North Carolina	0	3	0	0	2	0	0	2	0	0	2	0	0	2	0	0	2	0
Ohio	0	1	0	0	1	0	0	1	0	0	1	0	0	1	0	0	1	0
Oklahoma	0	1	1	0	0	1	0	0	1	0	0	1	0	0	0	0	0	0
Pennsylvania	0	1	1	0	1	1	0	0	1	0	0	0	0	1	1	0	0	1
South Dakota	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tennessee	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Texas	0	2	0	0	0	1	0	0	1	0	0	1	0	1	1	0	0	1
Utah	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Virginia	0	1	1	0	0	1	0	0	1	0	0	1	0	0	0	0	0	0
Washington	0	1	0	0	1	0	0	1	0	0	1	0	0	1	0	0	1	0
Wisconsin	0	1	0	0	1	0	0	1	0	0	0	0	0	1	0	0	0	0
Total	8	19	8	8	13	8	5	11	8	6	10	6	8	15	7	1	10	5

\*No learners from tribes

\*\*Module 5 Companion: Advancing Patient-Centered Cancer Survivorship Care

Table 3 shows descriptive statistics of the learners who completed at least one module in 2021 based on their primary profession (primary care providers, specialty providers, or other).

Table 3. 2021 Stratified Demographics by Primary Care, Specialty Provider, or Other	
Professions (n=101)	

Demographic Characteristic	Primary Care Provider Frequencies (%) (n=34)	Specialty Provider Frequencies (%) (n=50)	Other Professions Frequencies (%) (n=17)
Gender			
Cisgender female	28 (82.4%)	43 (86.0%)	14 (82.4%)
Cisgender male	6 (17.6%)	5 (10.0%)	2 (11.8%)
l prefer not to answer	0 (0.0%)	2 (4%)	1 (5.9%)
Age			
18-29	10(29.4%)	6 (12.0%)	5 (29.4%)
30-39	11 (32.4%)	17 (34.0%)	6 (35.3%)
40-49	4(11.8%)	9 (18.0%)	1 (5.9%)
50-59	5(14.7%)	10 (20.0%)	4 (23.5%)
60 or older	4(11.8%)	6 (12.0%)	1 (5.9%)
I prefer not to answer	0 (0.0%)	2 (4.0%)	0 (0.0%)
Race			
American Indian or Alaska Native	1 (2.9%)	1 (2.0%)	0 (0.0%)
Asian	8 (23.5%)	5 (10.0%)	0 (0.0%)
Black or African American	2 (5.9%)	2 (4.0%)	1 (5.9%)
Latino	1 (2.9%)	1 (2.0%)	1 (5.9%)
Native Hawaiian or Other Pacific Islander	0 (0.0%)	1 (2.0%)	0 (0.0%)
White	19 (55.9%)	36 (72.0%)	12 (70.6%)
Other	1 (2.9%)	0 (0.0%)	0(0.0%)
I prefer not to answer	2 (5.9%)	4 (8.0%)	3 (17.6%)
Ethnicity			
Hispanic or Latino	4(11.8%)	2 (4.0%)	3 (17.6%)
Middle Eastern	0 (0.0%)	2 (4.0%)	0 (0.0%)
None of the above	27 (79.4%)	42 (84.0%)	12 (70.6%)
I prefer not to answer	3 (8.8%)	4 (8.0%)	2 (11.8%)
Location			
Rural community	3 (8.8%)	9 (18.0%)	1 (5.9%)
Suburban community	10 (29.4%)	19 (38.0%)	5 (29.4%)
Urban community	20 (58.8%)	16 (32.0%)	7 (41.2%)
Other Not and list ha	0 (0.0%)	5 (10.0%)	2 (11.8%)
Not applicable	1 (2.9%)	1 (2.0%)	2 (11.8%)
Practice Site			
Academic/research institution	15 (44.1%)	10 (20.0%)	4 (23.5%)
Hospital (In-Patient)	4 (11.8%)	9 (18.0%)	3 (17.6%
Outpatient cancer care facility	4 (11.8%)	22 (44.0%)	1 (5.9%)
Primary care practice	4 (11.8%)	0 (0.0%)	0 (0.0%)
Other	6 (17.6%)	9 (18.0%)	8 (47.1%)
Not applicable	1 (2.9%)	0 (0.0%)	1 (5.9%)

The majority of the learners identified themselves as nurses (33.6%), nurse practitioners (22.4%), and physicians (9.7%).

To evaluate the effectiveness of each module, learners were asked to complete a pre- and postmodule assessment survey. Each evaluation question was answered on a 5-point Likert scale: 1 -Strongly Disagree, 2 - Disagree, 3 - Neutral, 4 - Agree, 5 - Strongly Agree. Paired sample *t*-tests were then used to assess changes in self-reported knowledge of learning objectives in each module. Table 4 presents the results of the *t*-test indicating that all learners had increased their self-rated knowledge. (All modules, p < 0.05).

Module	Number of Learners	Pre- Assessment Mean (SD)	Post- Assessment Mean (SD)	Percent Change	T-Statistic	P* Value
1	126	3.07 (0.89)	4.14 (0.66)	34.9%	t=12.67	<0.001
2	91	2.98 (0.75)	4.09 (0.57)	37.2%	t=14.49	<0.001
3	71	3.03 (0.82)	4.11 (0.55)	35.6%	t=11.23	<0.001
4	50	3.38 (0.87)	4.35(0.53)	28.7%	t=8.01	<0.001
5	42	3.39 (0.91)	4.21 (0.60)	24.2%	t=6.79	<0.001
5C**	37	3.38 (0.86)	4.05 (0.78)	19.8%	t=5.25	<0.001
6	31	3.19 (0.68)	4.11 (0.63)	28.8%	t=7.28	<0.001
7	26	3.06 (0.80)	4.26 (0.68)	39.2%	t=7.08	<0.001
8	24	3.01 (0.79)	4.00 (0.62)	32.9%	t=5.94	<0.001
9	33	3.21 (0.75)	4.16 (0.68)	29.6%	t=6.38	<0.001
10	18	2.94 (0.86)	3.74 (0.71)	27.2%	t=4.09	0.001

Table 4. 2021 Pre- and Post-Assessment Means and Change in Learners Self-ConfidenceRatings

\* Statistical significance was set to p<.05. Bold indicates statistical significance

\*\* Module 5 Companion: Advancing Patient-Centered Cancer Survivorship Care

Additionally, all learners were presented with an evaluation survey upon module completion. Out of those individuals who completed the post-evaluation survey, 87.5% of the trainees indicated that they were overall satisfied with the modules; 86.0% of the learners would recommend the training to others; 90.2% of the learners agreed/strongly agreed that their knowledge had increased after completing the modules. Most learners (85.6%) felt motivated to make changes in their work due to this module, and 86.4% intended to apply what was learned in their work.

#### Discussion

The E-Learning Series module completion rates remain higher among specialty providers in comparison to primary care providers. While the enrollment rates decreased in 2021 in comparison to 2020, the training received interest from a number of professionals from new fields, such as health educators, students, and genetic counselors. The E-Learning Series is an educational program that has been popular and continues to be effective in increasing learners' confidence in their capabilities to care for cancer survivors. Evaluation results are encouraging. The GW Cancer Center continues to ensure that modules are informed by recent evidence and continues to encourage national programs directors to share this resource with cancer care institutions in their state, tribe, or territory.

#### Resources

The GW Cancer Center offers the following resources for Comprehensive Cancer Control Programs/Coalitions to help promote and disseminate the E-Learning Series.

- <u>The Marketing and Dissemination Toolkit for Online Courses from the GW Cancer</u> <u>Center</u>: Contains strategies for marketing the E-Learning Series, as well as prewritten content, graphics, social media posts, and flyers that can be customized with your organization's logo.
- <u>Cancer Survivorship E-Learning Series for Primary Care Providers Promotional</u> <u>Video</u>: A short promotional video about the E-Learning Series. Consider sharing the video through your e-newsletters, website, social media, or show at local professional meetings/conferences.

Other available cancer survivorship resources for a variety of audiences, from health care providers to cancer control professionals:

- <u>Advancing Patient-Centered Cancer Survivorship Care Toolkit</u>: An adaptable set of tools to help providers improve patient-centered cancer survivorship care in their state, tribe, or territory. The toolkit includes the following items:
  - Advancing Patient-Centered Survivorship Care Workshop Planning and Facilitation Guide, Workshop Tools (Workshop Assessment Activity, Root Causes Worksheet, Facilitator Version for Workshop Activities, Action Plan Worksheet), Slide Deck, and Evaluation Tools (Full Version and Poll Version of Pre- and Post-Evaluation): These resources include a checklist, sample agendas, promotion tips, worksheets for workshop activities, and facilitation instructions together with a presentation and speaker notes to facilitate such activities, and evaluation surveys/polls to assess the workshop success.
  - Clinical Support Tools for Providers and Patients:

- Preparing for Your Doctor's Visit: A Worksheet for People Who Have Finished Cancer Treatment: This brief worksheet can help patients prepare for their next doctor's visit. The GW Cancer Center offers a <u>formatted</u> and <u>adaptable</u> version. Available in Spanish (<u>adaptable</u> and <u>formatted</u> versions).

- Provider Checklist: For Patients Who Have Finished Cancer Treatment: This checklist can help inform providers' clinical encounters with people who have a history of cancer and are not in active treatment. The GW Cancer Center offers a <u>formatted version</u> and a version that can be <u>adaptable</u>.

 Needs assessment tools: Assessment strategies based on the Patient-Centered Survivorship Care Index (<u>Cancer Center Assessment</u> and <u>Cancer Survivor</u> <u>Survey</u>).

- GW Cancer Center <u>Resources List</u>: A list of resources that can support both providers and people with a history of cancer.
- <u>American Society of Clinical Oncology (ASCO) Survivorship Care Planning Tools</u>: Sample templates and resources for survivors' long-term care needs.
- <u>CDC Survivorship Care Plans</u>: A basic overview of what a survivorship care plan is and why it is important.
- <u>CDC Health Equity in Cancer</u>: An overview of cancer health disparities and equity in cancer prevention and control, among other resources.
- <u>National Cancer Survivorship Resource Center</u>: Information on treatment and follow-up care for survivors and providers.
- <u>National Cancer Survivorship Resource Center Toolkit</u>: Assistance with implementing the ACS cancer survivorship care guidelines for colorectal, head and neck, and prostate cancers and the ACS /ASCO cancer survivorship care guideline for breast cancer. In addition to the guidelines, information is included on training opportunities for primary care providers and patient materials to help activate cancer survivors to be active participants in their survivorship care.



## **Appendix A: Learning Objectives of E-Learning Series Modules**

Module	Learning Objectives
<u>1. Current Status of Survivorship Care</u> and the Role of Primary Care Providers	<ul> <li>I am confident in my knowledge of models of cancer survivorship follow-up care</li> <li>I am confident in my ability to describe national efforts related to survivorship care</li> <li>I am confident in my understanding of a primary care provider's (PCP) role in providing care to cancer survivors</li> </ul>
2. Late Effects of Cancer and its Treatments: Managing Comorbidities and Coordinating with Specialty Providers	<ul> <li>I am confident in my ability to describe how cancer treatment late effects may interact with other non-cancer comorbidities</li> <li>I am confident in my ability to describe common late effects after treatment with chemotherapy, radiation therapy, hormone therapy, and surgery</li> <li>I am confident in my ability to implement a coordinated plan of care/consult with specialty providers to manage late medical effects of cancer when appropriate</li> </ul>
3. Late Effects of Cancer and its Treatments: Meeting the Psychosocial Health Care Needs of Survivors	<ul> <li>I am confident in my ability to identify types of psychosocial issues and how they vary based on time since treatment completion</li> <li>I am confident in my ability to describe risk factors for psychosocial consequences of cancer and its treatment</li> <li>I am confident in my ability to describe how to screen for distress and the PCP's role in follow-up psychosocial care</li> <li>I am confident in my ability to provide appropriate psychosocial care to post-treatment cancer survivors</li> </ul>
<u>4. The Importance of Prevention in</u> <u>Cancer Survivorship: Empowering</u> <u>Survivors to Live Well</u>	<ul> <li>I am confident in my ability to explain the PCP role in providing survivorship care focused on prevention, wellness, and evidence-based guidelines for screening</li> <li>I am confident in my ability to provide guideline-supported recommendations for secondary prevention to cancer survivors regarding sunscreen, diet, obesity, exercise, alcohol, and tobacco</li> <li>I am confident in my ability to explain the importance of prevention and wellness in cancer survivorship care</li> </ul>
<u>5. A Team Approach: Survivorship Care</u> <u>Coordination</u>	<ul> <li>I am confident in my ability to explain the importance of the survivorship care plan as a communication tool to coordinate care between the oncologist and primary care provider</li> <li>I am confident in my ability to describe the role of the primary care provider in providing follow-up care to cancer survivors in the primary care setting</li> <li>I am confident in my ability to describe the coordination of care between oncologists and primary care providers in transitioning a patient from oncology to primary care</li> <li>I am confident in my ability to describe the roles of oncologists and primary care providers in the shared-care model</li> </ul>
5.1. Advancing Patient-Centered Cancer Survivorship Care	• I am confident in my ability to describe patient-reported priorities for cancer survivorship care

6. Cancer Recovery and Rehabilitation 7. Spotlight on Prostate Cancer Survivorship: Clinical Follow-Up Care Guideline for Primary Care Providers	<ul> <li>I am confident in my ability to understand the role and importance of rehabilitation post-treatment</li> <li>I am confident in my ability to understand the role and importance of spirituality during recovery post-treatment</li> <li>I am confident in my ability to identify interventions to assist in physical, emotional, and spiritual recovery of cancer survivors</li> <li>I am confident in my ability to describe the potential long-term and late effects of prostate cancer and its treatment</li> <li>I am confident in my ability to describe how to care for</li> </ul>
	<ul> <li>prostate cancer survivors as outlined in the new American</li> <li>Cancer Society Prostate Cancer Survivorship Care Guideline <ul> <li>I am confident in my ability to demonstrate understanding of a</li> <li>PCP's role in providing follow-up care to prostate cancer survivors</li> <li>I am confident in my ability to appropriately utilize current</li> <li>clinical guidelines when providing care to prostate cancer survivors</li> </ul> </li> </ul>
<u>8. Spotlight on Colorectal Cancer</u> <u>Survivorship: Clinical Follow-Up Care</u> <u>Guideline for Primary Care Providers</u>	<ul> <li>I am confident in my ability to describe potential late and long-term effects of disease or treatments for colorectal cancer survivors</li> <li>I am confident in my ability to describe how to care for colorectal cancer survivors as outlined in the new American Cancer Society Colorectal Cancer Survivorship Care Guideline</li> <li>I am confident in my ability to explain a PCP's roles in providing clinical follow-up care to colorectal cancer survivors</li> </ul>
<u>9. Spotlight on Breast Cancer</u> Survivorship: Clinical Follow-Up Care Guideline for Primary Care Providers	<ul> <li>I am confident in my ability to describe potential long-term and late effects of breast cancer and its treatments</li> <li>I am confident in my ability to describe how to care for breast cancer survivors as outlined in the American Cancer Society/American Society of Clinical Oncology Breast Cancer Survivorship Guideline</li> <li>I am confident in my ability to explain a Primary Care Clinician's role in providing clinical follow-up care to breast cancer survivors</li> </ul>
<u>10. Spotlight on Head and Neck Cancer</u> <u>Survivorship: Clinical Follow-Up Care</u> <u>Guideline for Primary Care Providers</u>	<ul> <li>I am confident in my ability to describe potential long-term and late effects of head and neck cancer and its treatment</li> <li>I am confident in my ability to describe how to care for head and neck cancer survivors as outlined in the American Cancer Society Head and Neck Cancer Survivorship Care Guideline</li> <li>I am confident in my ability to describe a primary care Clinician's role in providing clinical follow-up care to head and neck cancer survivors</li> </ul>