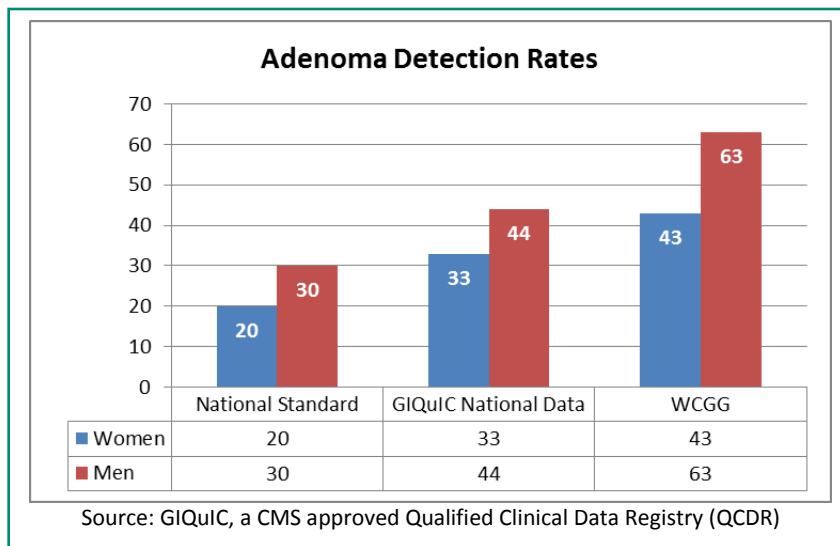


# What is a Quality Colonoscopy?

Not all colonoscopies are alike! Studies show a marked difference in colorectal cancer (CRC) risk reduction between facilities and physicians (gastroenterologists vs other specialists).

## What are the most important factors for a high quality colonoscopy? \*ASGE guidelines

- **Cecal intubation rate with photo documentation**, i.e. How often do we make it to the end?
  - Benchmark: >90%
  - WCGG: 99%
- **Proper use of recommended intervals** between colonoscopies performed for average-risk patients and for colon polyp surveillance.
  - WCGG has a robust, blinded, quarterly evaluation of representative pathology for each physician to ensure proper surveillance. Our CMS QualityNet Data shows compliance in excess of 98%.
- **Adenoma Detection Rate or ADR**, the most important measure of a quality colonoscopy (i.e. How often do we detect a pre-cancerous polyp in the colon and remove it?)
  - Benchmark by ASGE/AGA: ADR target of 30% is recommended for men and 20% for women.
  - > 6 minute colon withdrawal time associated with greater ADR



**For every 1% increase in ADR, there was a 3% reduction in CRC incidence and 5% reduction in cancer mortality. Higher ADRs were associated with lower risk of cancer in both men and women.**

*Corley, D et al, Adenoma Detection Rate and Risk of Colorectal Cancer and Death, NEJM, 2014; 370:1298-306.*

