

# Implementing Standard Pregnancy Screening Protocol Prior to Therapeutic Radiation

Radiation Oncology

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## BACKGROUND

There is no national guideline or uniform statement about how to screen and prevent pregnancy in women of child bearing age who are to undergo radiation therapy. At our institution, it has been left to the discretion of the provider to determine who should be screened for pregnancy. We have developed a protocol to regularly screen all women of childbearing age with intact reproductive organs ages 12-49. Screening must take place within 30 days prior to CT simulation.

## AIM STATEMENT

To screen women of reproductive age prior to beginning radiation treatments and to prevent unexpected pregnancy during radiation treatments for women of child bearing age. Goal of 90% screened prior to CT sim, with remainder screened prior to starting RT.

MUSC Pillar: Quality

## METHODS/INTERVENTION

Established new policy requiring women aged 12-49 with intact reproductive organs will need pregnancy testing. Educated all staff on the policy. Patient records from 2018-October 2021 were also reviewed to establish a baseline screening rate.

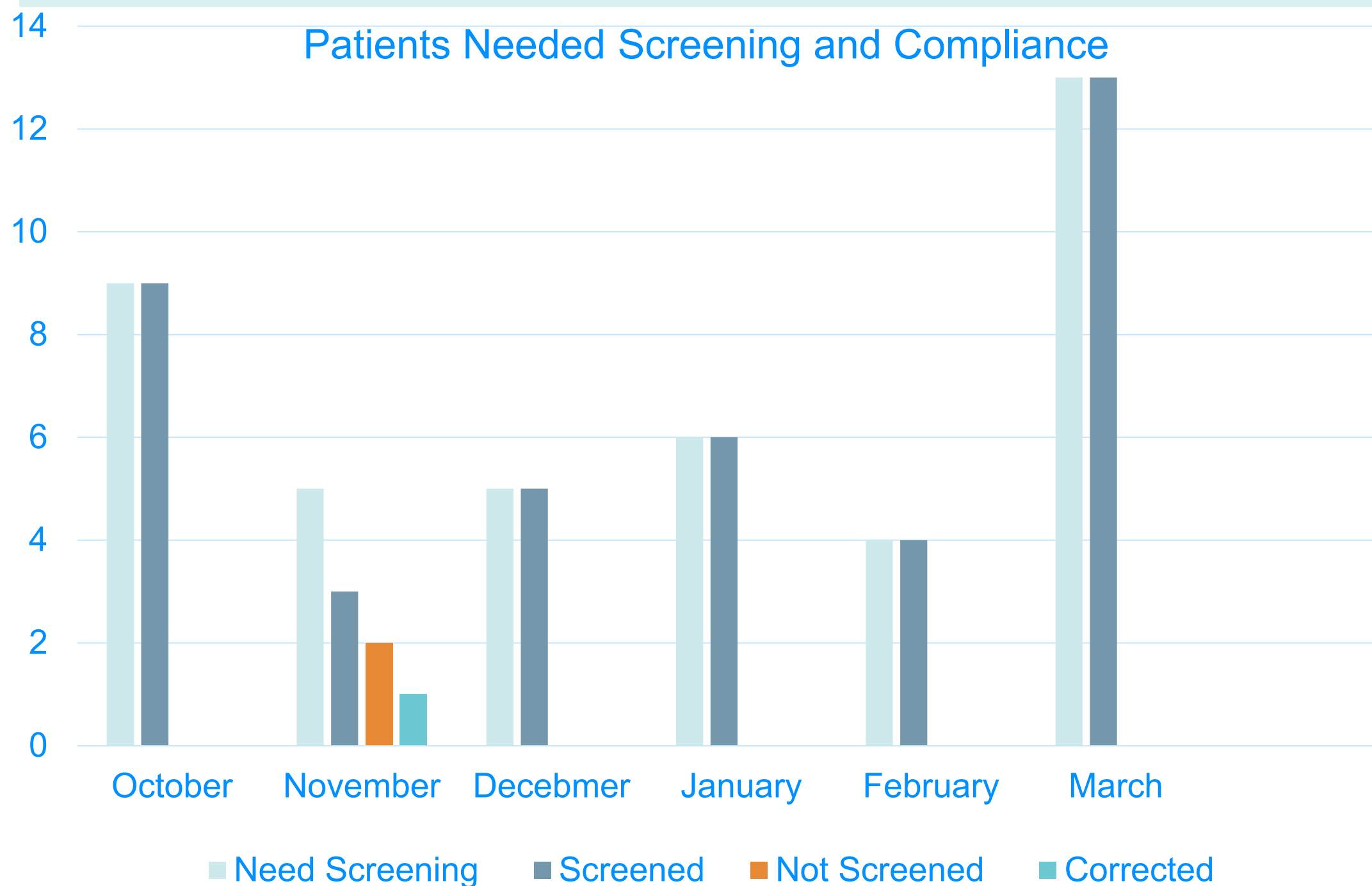
Extensive documentation and pregnancy counseling must be done if patient refused screening.

Created a new section on our internal CT request form designating who needed to be screened, and a hard stop was implemented if patient needed screening but had not completed.

Obtained ability to perform POC pregnancy testing in all of our clinics, including satellite sites.

Performed interim analysis from October through December and determined if policies need to be adapted.

## RESULTS



- Baseline pregnancy screening rate in the patient population prior to new intervention was 57.2% based on the new protocol.
- 89.5% compliance Oct-December. 1 patient refused after Sim. Other deviation corrected.
- 100% compliance for Jan-March
- 95.3% overall compliance during study period.

## CONCLUSIONS

We met our primary goal of screening at least 90% of eligible women.

We can still improve on correcting deviations.

We still need to encourage pregnancy prevention as RT can last up to 7 weeks.

### BARRIERS:

Some patients are given POC in pre-op areas that can be difficult to find.

Some patients still refuse after counseling.

Establishing new protocol required extensive education up front as it changed work flow.

## NEXT STEPS

Continue to screen all eligible patients

Continue to educate staff and patients on importance of screening

Potentially collaborate with other Rad Onc Programs on strategies to improve screening

Consider screening for pregnancy during protracted RT