**Title:** **Self Perceived Confidence and Knowledge of Colorectal Cancer Screening and Surveillance Guidelines – A Comparison of Trainee Colonoscopists to their Non-Colonoscopist Peers.**

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**Objectives:** Our objective was to assess knowledge of colorectal cancer (CRC) screening or surveillance guidelines among trainee colonoscopists and their peers.

**Abstract:** Data shows practicing physicians do not display accurate knowledge of or follow guidelines for CRC screening and surveillance. It is unknown if this extends to medical trainees. We presumed that trainees who perform colonoscopy would have greater knowledge and application of guidelines versus their non-colonoscopist peers.

An IRB approved 16-question web based survey assessing perceived confidence in recalling and accurate knowledge of published CRC screening and surveillance guidelines was created. To test knowledge, respondents were asked to identify factors incorporated into guidelines to determine CRC screening (age, family and personal history of CRC and polyps, IBD) and surveillance (polyp number, size, pathology and piecemeal resection) intervals.

Directors of ACGME approved gastroenterology (GI), internal medicine (IM), family practice (FP), general surgery (GS), ob/gyn (OB), urology (U), and colorectal surgery (CORS) programs were emailed a request to forward the survey to their trainees. Pearson’s chi square test compared confidence, and accuracy between trainee colonoscopists vs. non-colonoscopists. P < 0.05 was statistically significant.

586 responses were received: GI (114), IM (159), FP (147), GS (51), OB (78), U (13), CORS (13) and other (11). 85% of respondents ordered colonoscopy and 29% performed colonoscopy.

SCREENING: More trainee colonoscopists reported confidence (78% vs. 64%) but had lower accuracy in answering the vignettes (45% vs. 65%) and identifying both factors and correct answers to vignettes (10% vs. 22%) than their peers.

SURVEILLANCE: More trainee colonoscopists reported confidence (85% vs. 36%) and had higher accuracy answering the vignettes (45% vs. 26%), identifying factors (51% vs. 4%) and identifying both factors and correct answers to vignettes (29% vs. 0.24%) than their peers.

Knowledge of CRC screening and surveillance guidelines is poor among trainee colonoscopists and their peers. Interventions are needed to enhance the basic knowledge of trainees regarding CRC screening and surveillance recommendations.