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“Assessment of Oncofertility Care and Provider Knowledge at Gulf South NCORP Hospitals”

Adolescent and young adult (AYA) cancer patients are experiencing higher survival rates with the advancement of current cancer treatment options, but these treatments come with the risk of significant and lifelong impacts on fertility. Though guidelines for providers to discuss fertility preservation (FP) prior to starting cancer treatment with AYAs have been published, numerous barriers impeding patient-provider communication about fertility care and access to fertility care remain prevalent. Patients of racial or ethnic minorities are disproportionately affected by these barriers, demonstrating the necessity for resources such as the risk stratification model developed by the Pediatric Initiative Network (PIN) of the Oncofertility Consortium. This model assesses future gonadal insufficiency/infertility resulting from cancer treatment.

This study assesses the clinical utility of the PIN Risk Assessment System for treatment-related gonadal insufficiency and infertility by evaluating how its use affects referral rates for FP. Through educating adult and pediatric oncologists about the PIN system and assessing the proportion of patients for which use of the PIN system was documented in their note/treatment plan, FP referral rates before and after the incorporation of the PIN system will be determined.

Results from this study will provide insight on the effectiveness of the PIN system in adult and pediatric hospitals within the Gulf South NCORP hospitals leading to more AYA cancer patient referrals for fertility care. By assessing a risk stratification model, we aim to promote the use of well-rounded approaches for risk assessment to increase referral rates for FP.