

## **SKIN CANCER PREVENTION COUNSELING BY PRIMARY CARE NURSE PRACTITIONERS (PCNPs) TO ADOLESCENTS**

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### **Background:**

Ultraviolet radiation (UVR) overexposure during childhood is a known risk factor for skin cancer in adulthood. Intentional UVR exposure among adolescents is increasing; thus, they warrant skin cancer prevention counseling by healthcare professionals. Such counseling is challenging because skin cancer prevention clinical guidelines for adolescents lack consistent sun-safety recommendations. In the United States primary care setting, primary care nurse practitioners (PCNPs) see the largest number of patients and thus have an opportunity to counsel adolescent patients for skin cancer prevention. However, little is known about PCNPs' skin cancer counseling.

### **Purpose:**

Describe PCNPs' skin cancer primary prevention knowledge; attitudes about skin cancer risk, counseling, and counseling practices; and congruency of PCNPs' counseling with skin cancer prevention clinical guidelines for adolescents.

### **Methods:**

Arizona PCNPs caring for adolescents in an outpatient setting were recruited from state NP listservs and completed a cross-sectional, 59-item online survey measuring the study main variables. Knowledge and attitudes scales had established internal consistency. Guidelines items were investigator-developed. Data were analyzed descriptively.

### **Outcomes:**

Forty-four of 67 (66%) PCNPs opening the survey were eligible and completed it. Their score for knowledge of skin cancer and primary prevention was 78% and for knowledge of practice guidelines was 39%. Participants responded that most of the time skin cancer was serious, adolescents are at risk, and sun avoidance reduces skin cancer risk. Participants strongly agreed that counseling adolescents about skin cancer prevention was in their scope of practice and that their advice could help adolescents reduce skin cancer risk; however, they were neutral for frequency of providing skin cancer prevention recommendations to adolescents at general and high risk during wellness visits. Participants reported low frequency of assessment of sun protection behaviors for adolescents in practice (e.g., assessing sun exposure and use of sun protection). Skin cancer counseling was not congruent with established clinical guidelines.

### **Implications for practice and research:**

PCNPs are an ideal group to target for continuing education for skin cancer prevention in adolescents. This education should include information about skin cancer risk in youth and current prevention recommendation guidelines. Education outcomes should be evaluated in a larger population of PCNPs.