Colorectal Cancer Screening Discussion Scripts for Healthcare Providers Using Motivational Interviewing Communication Techniques

In general, use open ended questions, reflections and a guiding style in the discussion about colorectal cancer screening. Listen for ‘change talk’ (any expression of desire, ability, reason, need or commitment) and affirm/reflect any change talk you hear. The goal is to uncover personal reasons to accept a screening procedure so that the decision comes from patients themselves. Be sure to validate their autonomy and choice in decision making.

You might start with:

“Would it be alright if we spent some time today talking about colorectal cancer screening?”

Assuming the answer is “yes”, you might say or ask the following:

“I’d like to talk with you about two options, colonoscopy and stool testing cards, and I’d like to hear what you already know about these procedures and colorectal screening.”

“What are some reasons you might consider having a screening done?”

Validate, affirm and reflect any change talk – (e.g. “So your mother had colon cancer and you have some concerns about your own risk”; “It sounds like you know how beneficial early detection can be”)

Validate concerns/apprehensions expressed with reflections such as the following examples – “It sounds like you have some concerns about the preparation for colonoscopy causing you discomfort.”; “You’re not sure the benefits of screening would outweigh the risks for you.”; “Because you have no family history of any cancer, you think you really don’t need the screening.”

Ask permission to provide clarifying information – “I have some information that I think would be very helpful. Is it ok if I share that with you now?”

Provide information and then ask “So what do you make of all of this?”

Provide a summary that reflects the essence of what they shared, highlighting their change talk. If ambivalence remains, be sure to provide double sided reflections that capture first, their reluctance, followed by their reasons to consider a screening.

For example - “Let me summarize what I’ve heard so far. You are reluctant to have a colonoscopy because you expect the preparation to be uncomfortable and you’ve thought that you were not at much risk for cancer and therefore could avoid having a colonoscopy. And you’ve learned some new information today about the benefits of colonoscopy and early detection, and how even top athletes, famous, and privileged individuals get cancer, and we’ve talked about ways to minimize the discomfort of the preparation. So where does this leave you? What would you like to do?”

You can also ask what might make help them feel more comfortable with having a screening done.