



# **Ovarian Cancer National Alliance**

## ***Survivors Teaching Students: Saving Women's Lives<sup>SM</sup>***

*With support from the Entertainment Industry  
Foundation*

An Ovarian Cancer Education Program for  
Medical and Health Professional Students

## **Presenter's Handbook**



Dear Ovarian Cancer Survivor:

Welcome to the Ovarian Cancer National Alliance's *Survivors Teaching Students: Saving Women's Lives*<sup>SM</sup> program! You are joining an innovative and critical national effort to educate students in health professional programs on ovarian cancer. Our goal is to increase the number of health care providers who recognize the symptoms of and risk factors for ovarian cancer so that the disease is detected earlier.

As you are aware, the majority of ovarian cancer cases are not diagnosed until the disease is advanced and women's survival is compromised. The symptoms may not be recognized early enough and too often women who are at high-risk are not identified or monitored. *Survivors Teaching Students: Saving Women's Lives* brings the faces and voices of ovarian cancer survivors like you into the classrooms of medical and health professional students to teach them about women's experiences with the disease. We are in a unique position to help students to become more sensitive to the symptoms of and risk factors for ovarian cancer so that when they become diagnosticians, they can diagnose women early and save lives.

This handbook will provide you with the background and information you need to facilitate the *Survivors Teaching Students* program in your community. These materials are to be used in conjunction with training by a representative of the Ovarian Cancer National Alliance, and will aid you in implementing and maintaining your local *Survivors Teaching Students* program. If you have questions regarding the program please contact the Ovarian Cancer National Alliance at 202-331-1332.

Thank you so much for your participation and commitment. You are a valuable partner and part of a national network of dedicated individuals who share your passion. The Ovarian Cancer National Alliance commends you for your efforts.

Sincerely,

Karen Orloff Kaplan, MSW, MPH, ScD  
Chief Executive Officer  
Ovarian Cancer National Alliance

***Survivors Teaching Students: Saving Women's Lives<sup>SM</sup> Program***  
**Presenter Agreement Form**

Please complete this form and return it to Linda John or the Ovarian Cancer National Alliance representative at the time of the training.

By completing this form you agree to:

- Notify your local facilitator if at any time you are unable to participate in the program.
- Follow the Ovarian Cancer National Alliance's "Key Policies Regarding Medical Information" as described below.

Speakers who make presentations on ovarian cancer may offer medical information, but they must never offer medical advice. Medical information is objective and consists of facts found in approved literature. It is information available to anyone seeking general knowledge about a disease and how it is treated. Medical advice consists of comments and suggestions that personalize medical information and makes a recommendation about what the audience should do or should not do regarding medical choices. A presenter should not: recommend a particular type of surgery or other treatment; suggest where a patient should go for medical care; or offer an opinion about a doctor or facility.
- Recognize and credit *Survivors Teaching Students: Saving Women's Lives* as a program of the Ovarian Cancer National Alliance in any written or verbal descriptions of the program.
- Please be aware that not every volunteer Presenter will actually be asked to serve. Needs and availability are constantly changing. Selections must be made by the Ovarian Cancer National Alliance on the basis of the needs of the program, read together with the experience, fitness and appropriateness of the available volunteers, at the particular point in time. Discrimination in selection on any basis prohibited by applicable law is contrary to the Ovarian Cancer National Alliance policy and never allowed.

---

**Name**

---

**Address**

---

**City**

**State**

**Zip Code**

---

**Telephone**

**Email**

## Table of Contents

	<b>Page Number</b>
Overview of the Ovarian Cancer National Alliance	5
<i>The Survivors Teaching Students: Saving Women’s Lives<sup>SM</sup> (STS)</i> Program <ul style="list-style-type: none"> <li>▪ Program Overview</li> <li>▪ How the Program is Conducted in Your Community</li> <li>▪ Your Role as a Presenter</li> </ul>	6  8  9
Tips and Resources for Presenters	11
Appendix <ul style="list-style-type: none"> <li>▪ Student Survey For Medical Schools</li> <li>▪ Student Survey For Nursing, Nurse Practitioner &amp; Physicians Assistant Programs</li> <li>▪ Medical Schools Participating in <i>STS</i> Program</li> </ul>	14

Handbook Version: June 2009

## **The Ovarian Cancer National Alliance**

The Ovarian Cancer National Alliance is a survivor-led, national umbrella organization that unites cancer activists, women's health advocates, health care providers, and researchers in the battle against ovarian cancer. The Ovarian Cancer National Alliance serves women across the country by working at the national level to increase public and professional understanding of ovarian cancer to advocate for more effective diagnostics, treatment and a cure.

### **Mission Statement**

The Ovarian Cancer National Alliance's mission is to conquer ovarian cancer by uniting individuals and organizations in a national movement.

### **About the Ovarian Cancer National Alliance**

In September 1997, leaders from seven ovarian cancer groups joined forces to form the Ovarian Cancer National Alliance. Their primary goal was to establish a coordinated national effort to place ovarian cancer education, policy, and research issues prominently on the agendas of national policy makers and women's health care leaders.

The founding organizations were the newsletter "Conversations!" (Texas); National Ovarian Cancer Coalition (Florida); Ovar'coming Together (Indiana); Ovarian Cancer Coalition of Greater Washington (Washington, D.C.); Ovarian Cancer Survivors Quilt Project (Virginia); Ovarian Plus International (Hawaii); and SHARE: Self-Help for Women with Breast or Ovarian Cancer (New York). Each of these has made a unique contribution to the ovarian cancer movement.

Today the Ovarian Cancer National Alliance conducts a number of programs to raise awareness of ovarian cancer; educate survivors and health professionals regarding the disease; and, advocate for multiple issues related to the disease, such as advancing research. The national office is headquartered in Washington, D.C., enabling the Ovarian Cancer National Alliance to be an integral part of the national women's health and cancer communities and providing the organization with an established and respected presence among health and policy leaders. In addition, through the Ovarian Cancer National Alliance's network of 50 partner member organizations throughout the country thus far, the organization further advances its advocacy and education efforts at the community level, and the network continues to grow.

### **Becoming a Partner Member**

As a partner member of the Ovarian Cancer National Alliance, you gain access to valuable trainings, resources and an extensive national group of dedicated individuals who share your passion. If you or your organization is interested in learning more about becoming a partner member, please contact Lindsey Boyle ([lboyle@ovariancancer.org](mailto:lboyle@ovariancancer.org)) or Cara Tenenbaum ([ctenenbaum@ovariancancer.org](mailto:ctenenbaum@ovariancancer.org)) by email or at 202-331-1332.

### **More Information**

For more information and resources on ovarian cancer visit the Ovarian Cancer National Alliance's website at: [www.ovariancancer.org](http://www.ovariancancer.org).

Ovarian Cancer National Alliance  
910 17<sup>th</sup> Street N.W., #1190, Washington, D.C. 20006  
P: 202-331-1332 F: 202-331-2292

## ***Survivors Teaching Students: Saving Women's Lives<sup>SM</sup> (STS)*** **Program Overview**

### **Background**

Ovarian cancer is among the five leading cancer-related causes of death among women in the United States (U.S.) and causes more deaths than any other cancer of the female reproductive system. The majority of cases are not diagnosed until the disease is far advanced and women's survival is compromised. Symptoms may not be recognized early enough, and too often, women who are at high-risk are not identified or monitored.

To address the issue of early detection, the Ovarian Cancer National Alliance conducts the *Survivors Teaching Students: Saving Women's Lives<sup>SM</sup> (STS)* program. The goal of the program is to enhance health professional students' understanding of ovarian cancer symptoms and risk factors in order to facilitate sooner diagnosis and detection. Betty Reiser, former Program Director and long-term ovarian cancer survivor, played a leading role in its facilitation and expansion.

### **Program Description**

*STS* achieves its goal by bringing ovarian cancer survivors into the classrooms of health professional students to share their stories and key information on the disease. The program is currently offered to a variety of medical and health professional students—our future diagnosticians, including medical students, nurse practitioner students, physician assistant students, and nursing students.

Below is a general description of the presentation.

- Each presentation lasts about one hour.
- Each presentation typically includes three presenters who are ovarian cancer survivors. The presentation should include women with different backgrounds and experiences, as feasible. In many cases the women who present will have been diagnosed at a late stage, but it is valuable to include women diagnosed at an early stage as well.
- At the presentation, the facilitator will provide a brief introduction and then each presenter tells her story, illustrating the difficulty of early diagnosis and what happened to her as a result. The survivor's story puts a face and voice to the disease, which is a powerful tool in increasing students' understanding.
- Students gain insights into listening to patient concerns and become sensitized to the psychosocial aspects of ovarian cancer as well as the need for sooner detection.
- After the presentations, a dialogue is opened between the presenters and the students to enable direct and substantive interaction.
- Students are also given a brief pre and post survey to assess their understanding of the disease and the value of the presentation. (A survey has been included in the Appendix.)
- The presentation is offered free of charge to health professional schools.

As you conduct the program in your community, certain aspects of the presentation may need to be adapted or evolve to best serve the students and schools.

## **Reaching Health Professional Students**

### Medical Students

The program was initially piloted by Betty Reiser at the University of Medicine and Dentistry of New Jersey (UMDNJ)—New Jersey Medical School in 2002. Thus far, the *STS* program has expanded into more than 50 medical schools nationwide. (A list of currently participating schools is included in the Appendix.). Presentations are typically given to third year medical students during their gynecology rotation. This is because it is the first year of their training where they interact with patients. Because of the rigorous rotation schedule, a local *STS* group will present to a new group of medical students every six to eight weeks, depending on the school.

The program has been successful in reaching medical students and continues to draw interest from medical school faculty around the country. The medical students' reactions and written evaluations have been extremely positive and reinforce the Ovarian Cancer National Alliance's belief that this unique approach can be a vital adjunct to the academic learning process.

It is the Ovarian Cancer National Alliance's goal that this program will be incorporated into every medical school in the U.S. Working with our partner member organizations and ovarian cancer advocates throughout the country, we are striving to make this a reality.

### Nurse Practitioner Students

Recognizing that in today's health care system there are health professionals who work in partnership with physicians and play a leading role in delivering primary care, in 2005 the Ovarian Cancer National Alliance expanded the *STS* program to nurse practitioner programs through a pilot in New York State with the Department of Health (NYSDOH).

In most locations, the presentations to nurse practitioner students are given once per semester to the second year students in primary care or women's health specialties. Often the local *STS* group was already presenting to medical students and has added other health professional students based on their capacity. In some locations where there is no medical school, *STS* groups present only to nurse practitioner and sometimes nursing students as well.

### Physician Assistant Students

In 2006-2007, through the same partnership with the NYSDOH, the Ovarian Cancer National Alliance piloted the *STS* program in physician assistant programs in New York. As a result of the pilot, our goal is to develop resources to support local *STS* groups in offering presentations to this group of health professionals in training.

### Nursing Students

In 2007-2008, again with the NYSDOH, the Ovarian Cancer National Alliance began the *STS* program in nursing schools in New York. Other groups around the country have also begun to work with nursing schools, as well as physician assistant and nurse practitioner programs.

## How the Program is Conducted in Your Community

### Background

The Ovarian Cancer National Alliance, in partnership with a local ovarian cancer advocate or organization, has worked with the medical, graduate nursing, physician assistant, or nursing school in your area to have the *STS* program accepted into the school's curriculum.

You may be joining a *STS* group that is only presenting to medical students or, because there is no local medical school, only nursing or physician assistant students. Whatever your target group of health professional students, the main information you need to know to do the program is the same. Of course, the frequency and schedule of presentations will differ for each group.

### The *STS* Facilitator

There is a "*STS* Facilitator" who serves as the leader of your group; she is most likely the person who coordinated your training or invited you to participate in the *STS* program. The *Facilitator* is the main contact for the Ovarian Cancer National Alliance, the health professional schools and your group.

She works with the schools to schedule the presentations; she works with you and others in your group to ensure that there are enough presenters at each event, shares any important information with you related to the presentation such as location, directions, etc.; and she works with the Ovarian Cancer National Alliance to report information on the presentations you conduct.

Your *STS* Facilitator is your resource for information or questions related to the *STS* program in your community.

You can expect to be contacted by your *STS* Facilitator regularly as presentations are scheduled. You should try to respond promptly with your availability. Participation in the program should be convenient for you and something that you want and can do.

### The Presentation

Here is an outline of a typical presentation, lasting 1 hour.

- Introduction and pre survey distribution – 5 minutes
- Presenter #1 – 7 minutes
- Presenter #2 – 7 minutes
- Presenter #3 – 7 minutes
- Question and Answers – 15 minutes
- Closing – 5 minutes
- Administer Surveys & Distribute Handouts – 5 minutes

The "Introduction" and "Closing" will be conducted by the *STS* Facilitator or a designated substitute.

## Your Role as a Presenter

As a presenter, you have committed to sharing your story with the health professional students in the brief amount of time allotted for the *Survivors Teaching Students: Saving Women's Lives<sup>SM</sup> (STS)* presentation. We know this can be challenging! The training you receive as part of the *STS* program should prepare you to do this and even help you to focus on the aspects of your story that are most educational to the students.

It is not your role to provide medical advice or medical instruction. You are only responsible for accurately sharing the medical information that relates to your story. If you are unsure of information related to your story, then you should refer the students to the instructor for the correct information.

You should try to tell your story from memory. It is most important that you feel comfortable.

### Delivering the Key Messages

Below are the key messages that the *STS* program aims to deliver. It is not expected that every presenter address each of the points listed below, but the presentation overall is a vehicle for these messages. The messages around symptoms have been bolded below as they are central to the program. As you have already learned or will learn from the training, it is important for each presenter to focus on the aspects of her story that emphasize and reinforce these messages. If certain points are not discussed, the facilitator should raise them in the discussion that takes place after the presentations.

- Ovarian cancer is the most lethal gynecologic cancer and one of the five leading causes of cancer death among women in the United States.
- The majority of women diagnosed with ovarian cancer are at advanced stages.
- Currently, there is no reliable screening test for the early detection of ovarian cancer.
- When detected early, the survival rates for ovarian cancer greatly improve.
- **Ovarian cancer, even in its early stages, has symptoms.**
- **Know the symptoms of ovarian cancer:**
  - **Bloating**
  - **Pelvic or abdominal pain**
  - **Difficulty eating or feeling full quickly**
  - **Urinary symptoms (urgency or frequency)**
- **Women who have these symptoms almost daily for more than a few weeks should see their doctor, preferably a gynecologist.**
- **Several other symptoms have been commonly reported by women with ovarian cancer. These symptoms include fatigue, indigestion, back pain, pain with intercourse, constipation and menstrual irregularities. However, these other symptoms are not as useful in identifying ovarian cancer because they are also found in equal frequency in women in the general population who do not have ovarian cancer.**
- If the signs and symptoms suggest ovarian cancer, a complete pelvic exam, including a recto-vaginal examination; a transvaginal ultrasound; and a CA 125 blood test should be performed.

- If ovarian cancer is suspected, the woman must be referred to a gynecologic oncologist.
- Women with a personal or family history of ovarian, breast, or colorectal cancer may be at higher risk for ovarian cancer.
- Although the statistics around ovarian cancer outcomes are not good—remember that each woman’s experience is unique. It is important to provide hope when communicating with your patients.

## Tips and Resources for Presenters

Ovarian cancer survivors have an unfortunate, yet unique, perspective that enables them to bring awareness to others. A survivor “story” can be an influential tool in educating the general public and medical providers in your community on ovarian cancer. This section provides tips and resources on harnessing the power of your survivor story to raise awareness of the disease.

This section offers the following content to help participants in the *STS* Program in being an effective presenter.

- Criteria for an Effective Story
- Key Policies Regarding Medical Information
- Tips for Handling Questions
- Tips for Reducing Nervousness
- Assessing Your Performance

### Criteria for an Effective Story

The following are general criteria to keep in mind to deliver an effective story.

- Use your own words
- Present information that is medically accurate
- Conclude with an explicit message to the audience which reiterates the key messages around symptoms, risk factors, key steps in diagnosis, and seeking the care of a gynecologic oncologist
- Use plain language and, if necessary, define medical terms concisely

### Key Policies Regarding Medical Information

Speakers who make presentations on ovarian cancer may offer medical information, but they must never offer medical advice.

**Medical Information** is objective and consists of facts found in approved literature. It is information available to anyone seeking general knowledge about a disease and how it is treated.

**Medical Advice** consists of comments and suggestions that personalize medical information and makes a recommendation about what the audience should do or should not do regarding medical choices.

A presenter should not:

- Recommend a particular type of surgery or other treatment.
- Suggest where a patient should go for medical care.
  - Note: The Ovarian Cancer National Alliance recommends that all women who are suspected of having ovarian cancer or diagnosed with ovarian cancer seek the care of a gynecologic oncologist. However, the Ovarian Cancer National Alliance does not recommend specific physicians. Women should be referred to the Gynecologic Cancer Foundation ([www.wcn.org](http://www.wcn.org) or 800-444-4441) to search their database to find a listing of gynecologic oncologists in their area.
- Offer an opinion about a doctor or facility.
  - Note: Names of physicians or facilities should not be used in the presentations.

### Tips for Handling Questions

1. Once you complete the presentations, give the students a few minutes before you start to raise questions. They may need a moment to collect their thoughts and formulate the questions.

2. When a question is asked, repeat the question, if necessary, so that everyone in the audience hears it.
3. If you are not sure you understand the question, or if the student has prefaced the question with a long introduction, paraphrase the question and get confirmation from the student. (For example, “I want to be sure I understand your question. Are you saying . . .?”)
4. Answer the question as simply and briefly as possible. If you know that the answer to the question is contained in the handouts, reinforce that the handouts contain more details.
5. If only one student has questions, try to use the questions to open up a larger discussion with the group.
6. If the question includes a request for advice or medical instruction, respond as follows: “I am not qualified to offer an opinion about a specific situation. However, I can say . . .” and answer the question in general terms, if appropriate, or refer them to an appropriate resource such as their instructor.
7. If many people raise their hands at once, try to respond to the first one you see.
8. Select questioners from all parts of the room.
9. Monitor the time. When you wish to end the Question and Answer period, say “We have time for one more question.”
10. Thank the audience for their interest and express your willingness to remain after the presentation to answer any remaining questions.

### **Tips for Reducing Nervousness**

Before the Presentation:

- Acknowledge fear
- Manage fear
- Visualize a positive experience
- Know your material well
- Know the audience
- Know the setting
- Practice, practice, practice!

At the Presentation:

- Pause before beginning
- Take a deep breath and smile
- Pick out friendly or interested audience members and look at them to begin

### **Assessing Your Performance**

When you complete a presentation, it is helpful to ask yourself the following questions to help improve each future presentation you make.

- Was I well-prepared for the presentation?
- What were the audience's main concerns? How did I respond to those concerns?
- Did I provide all the needed information and at the appropriate times?
- Did I avoid giving medical advice?
- Did the audience appear to be comfortable with me?
- Did I respond to questions adequately?
- Did I keep within my time limit?
- What would I do differently next time?
- What satisfaction did I receive from making this presentation?

In addition, you can assess your performance using the checklist below. This should also help in identifying what areas may need improvement in future presentations.

***Content***

- \_\_\_\_\_ Introduced self briefly and appropriately
- \_\_\_\_\_ Included your motivation
- \_\_\_\_\_ Body of story contained the recommended information, as appropriate
  - \_\_\_\_\_ Symptoms
  - \_\_\_\_\_ Risk factors
  - \_\_\_\_\_ Early diagnosis and survival
  - \_\_\_\_\_ Key steps in diagnosis and treatment
  - \_\_\_\_\_ Referral to gynecologic oncologist
- \_\_\_\_\_ Concluding remarks were concise and strong
- \_\_\_\_\_ Presentation was medically accurate

***Behavior***

- \_\_\_\_\_ Appeared relaxed and confident
- \_\_\_\_\_ Maintained eye contact with audience
- \_\_\_\_\_ Avoided distracting gestures

***Voice***

- \_\_\_\_\_ Spoke so everyone could hear
- \_\_\_\_\_ Spoke words clearly
- \_\_\_\_\_ Varied speed and pitch
- \_\_\_\_\_ Used pauses rather than non-words

# Appendix

## Survivors Teaching Students: Saving Women's Lives An Ovarian Cancer Presentation

### Pre-Evaluation

Date:	
Name of School:	Circle: Medical/ Nursing/PA

(Circle any/All that apply)

1. In general, I have a basic understanding of ovarian cancer including:
  - A. Risk factors True/False
  - B. Signs and symptoms True/False
  - C. Diagnostic protocols True/False
  
2. Women are screened regularly for ovarian cancer True/False
  
3. A family history of which of the following is important in considering ovarian cancer risk
  - a. Breast cancer True/False
  - b. Ovarian cancer True/False
  - c. Uterine cancer True/False
  - d. Colon cancer True/False
  - e. Lung cancer True/False
  
4. A personal history of which of the following is important considering ovarian cancer risk
  - a. Breast cancer True/False
  - b. Infertility True/False
  - c. Cervical cancer True/False
  - d. Birth control pill use True/False
  
5. If I suspect a patient has ovarian cancer I would refer her to
  - a. A gynecologist True/False
  - b. An oncologist True/False
  - c. A gynecologic oncologist True/False
  
6. List three symptoms, which, if persistent, would lead you to consider ovarian cancer.



**Survivors Teaching Students: Saving Women's Lives**  
**An Ovarian Cancer Presentation**  
Post-Evaluation

Date:	
Name of School:	Circle: Medical/ Nursing/PA

(Circle any/All that apply)

7. In general, I have a basic understanding of ovarian cancer including:
  - A. Risk factors True/False
  - B. Signs and symptoms True/False
  - C. Diagnostic protocols True/False
8. Women are screened regularly for ovarian cancer True/False
9. A family history of which of the following is important in considering ovarian cancer risk
  - f. Breast cancer True/False
  - g. Ovarian cancer True/False
  - h. Uterine cancer True/False
  - i. Colon cancer True/False
  - j. Lung cancer True/False
10. A personal history of which of the following is important considering ovarian cancer risk
  - e. Breast cancer True/False
  - f. Infertility True/False
  - g. Cervical cancer True/False
  - h. Birth control pill use True/False
11. If I suspect a patient has ovarian cancer I would refer her to
  - d. A gynecologist True/False
  - e. An oncologist True/False
  - f. A gynecologic oncologist True/False
12. List three symptoms, which, if persistent, would lead you to consider ovarian cancer.
13. How has the presentation changed the way you think about ovarian cancer?
14. Would you consider this form of experiential learning an effective method of learning more about ovarian cancer or another condition?
15. How can the presentation be more effective in conveying survivors' experiences, the importance of the symptoms or difficulties in diagnosis.

## ***Survivors Teaching Students: Saving Women's Lives<sup>SM</sup>*** **Ovarian Cancer Information and Resources**

The Ovarian Cancer National Alliance is a nonprofit national umbrella organization that unites cancer activists, women's health advocates, health care providers, and researchers in the battle against ovarian cancer. *Survivors Teaching Students: Saving Women's Lives<sup>SM</sup>* is a signature program of the Ovarian Cancer National Alliance that educates students about ovarian cancer during their health professional education.

The goal of the program is to increase the number of health care providers who recognize the symptoms of and risk factors for ovarian cancer so that the disease is detected earlier. This handout aims to address questions you may have as a result of the *Survivors Teaching Students* presentation and offers resources you can consult for further information. For more information on the Ovarian Cancer National Alliance, visit: [www.ovariancancer.org](http://www.ovariancancer.org).

### **Key Information on Ovarian Cancer**

- Ovarian cancer is the most lethal gynecologic cancer and one of the five leading causes of cancer death among women in the United States.
- Each year, approximately 22,000 women are diagnosed with ovarian cancer in the United States and about 15,000 American women die from the disease.
- The majority of cases – 81% – are not diagnosed until the disease is advanced and a woman's survival is significantly compromised.
- Currently, there is no reliable screening test for the early detection of ovarian cancer.

### **Ovarian Cancer Symptoms**

Ovarian cancer causes symptoms, even in its early stages.

The symptoms of ovarian cancer are:

- Bloating
- Pelvic or abdominal pain
- Difficulty eating or feeling full quickly
- Urinary symptoms (urgency or frequency)

Other symptoms can include fatigue, indigestion, back pain, pain with intercourse, constipation and menstrual irregularities. If a woman experiences any of these symptoms for more than a few weeks and they are unusual for her, she should see a gynecologist to receive a pelvic examination, transvaginal ultrasound and a CA 125 blood test.

### **Symptom Diary and Practice Guidance**

There is a packet of tools that women can use to pursue answers to their concerns that the symptoms they are experiencing may be evidence of ovarian cancer.

The **first tool** is a personal Symptom Diary, developed by the Ovarian Cancer National Alliance, which can be used to track persistency of symptoms over time that may indicate the possibility of ovarian cancer. The **second tool** is an Interim Practice Guidance that outlines important steps your doctor may take to evaluate whether your symptoms may be ovarian cancer.

This very important information should be shared publicly to help women with ovarian cancer get diagnosed sooner. You can download the packet by visiting [www.ovariancancer.org/diary](http://www.ovariancancer.org/diary).

### **Ovarian Cancer Risk Factors**

Every woman is at risk for ovarian cancer at any age; however, the following factors may increase a woman's risk:

- a personal or family history of breast, colon or ovarian cancer
- increasing age
- nullparity

Factors associated with a decreased risk of ovarian cancer include:

- using oral contraceptives
- having and breastfeeding children
- having a bilateral tubal ligation or hysterectomy
- having a prophylactic oophorectomy

### **Ovarian Cancer Statistics**

For information on ovarian cancer incidence and survival rates in the United States, visit the National Cancer Institute (NCI) Surveillance, Epidemiology, and End Results (SEER) Program website at <http://seer.cancer.gov>.

### **Ovarian Cancer Diagnosis and Screening**

The National Cancer Institute (NCI) also has a comprehensive section on ovarian cancer with resources for health care professionals at [www.cancer.gov/cancertopics/types/ovarian](http://www.cancer.gov/cancertopics/types/ovarian).

### **Genetics of Ovarian Cancer**

The National Cancer Institute (NCI) comprehensive cancer database, PDQ®, features an in-depth resource for health professionals “Genetics and Breast and Ovarian Cancer (PDQ®)” available at:

<http://www.cancer.gov/cancertopics/pdq/genetics/breast-and-ovarian/healthprofessional>.

In addition to genetics, this resource also addresses the other risk factors for the disease.

To find resources for patients and families who may have a genetic risk for ovarian cancer, visit the *FORCE: Facing Our Risk of Cancer Empowered* website at [www.facingourrisk.org](http://www.facingourrisk.org). *FORCE* is a national non-profit organization that offers education and support for women with an increased risk of breast or ovarian cancer due to a family history and/or genetic status. *FORCE* can help those concerned about their family history and possible genetic status find a cancer genetic counselor in their area. In addition, NCI’s Cancer Genetic Services Directory at [www.cancer.gov/search/geneticsservices](http://www.cancer.gov/search/geneticsservices) lists genetics professionals by city and state.

### **Standard Treatment for Ovarian Cancer**

The National Comprehensive Cancer Network, an alliance of 19 of the world’s leading cancer centers, develops, updates, and disseminates a complete library of clinical practice guidelines. The specific treatment guidelines for each cancer type are available on their website at [www.nccn.org](http://www.nccn.org), search “ovarian cancer.”

### **Gynecologic Oncologists**

Any woman who is suspected of having ovarian cancer should be referred to a gynecologic oncologist. The Society of Gynecologic Oncologists (SGO) is the national medical specialty society of physicians who are trained in the comprehensive management of women with malignancies of the reproductive tract and is the leading organization of gynecologic oncologists in the United States. A public education resource of SGO is the Women’s Cancer Network website, [www.wcn.org](http://www.wcn.org), which features a “Find a Doctor” link that enables you to search the SGO membership for specialists in your area by zip code.

### **Continuing Education and Professional Development in Oncology**

The Association of Physician Assistants in Oncology (APAO) is a non-profit specialty organization affiliated with the American Academy of Physician Assistants that consists of physician assistants working in the field of oncology. For more information, visit the APAO website at [www.apao.cc](http://www.apao.cc).

*Survivors Teaching Students: Saving Women's Lives<sup>SM</sup>*  
**An Ovarian Cancer Education Program for Medical Students**

**Medical Schools Participating throughout the United States**

2011

*The program is implemented in a total 98 of medical schools*

**Alabama**

1. University of Alabama School of Medicine
2. Calhoun Community College, Nursing Program
3. University of Alabama in Huntsville, School of Nursing

**California**

4. University of California College of Medicine, Irvine
5. University of California School of Medicine, Davis
6. University of California School of Medicine, San Diego
7. Stanford University School of Medicine
8. Touro University of Osteopathic Medicine, Vallejo\*
9. Azusa Pacific

**Colorado**

10. University of Colorado Health Sciences Center and School of Medicine, Denver

**Connecticut**

11. Yale University School of Medicine
12. University of Connecticut School of Medicine

**District of Columbia**

13. George Washington University School of Medicine and Health Sciences
14. Georgetown University School of Medicine
15. Howard University College of Medicine

**Florida**

16. Florida State University College of Medicine
17. FSU Medical School Association
18. Florida State University of Tallahassee
19. Nova South Eastern Tallahassee Florida
20. University of Miami School of Medicine
21. University of Florida, Gainesville Florida

**Georgia**

22. Emory University School of Medicine
23. Morehouse School of Medicine

**Hawaii**

24. University of Hawaii, School of Nursing and Dental Hygiene

**Kentucky**

25. University of Kentucky College of Medicine
26. University of Louisville School of Medicine

## **Louisiana**

27. Louisiana State University Medical School

## **Maryland**

28. Johns Hopkins University School of Medicine

## **Massachusetts**

29. Boston University School of Medicine
30. University of Massachusetts Medical School
31. Tufts University School of Medicine

## **Minnesota**

32. University of Minnesota Medical School

## **Michigan**

33. Michigan State University College of Human Medicine
34. Michigan State University School of Medicine
35. Michigan State School of Nursing
36. Michigan State School of Osteopathy
37. Wayne State University School of Medicine
38. V.A. Hospital Detroit

## **Missouri**

39. St. Louis University School of Medicine
40. St. Louis Nurse Practitioner Program
41. Washington University in St. Louis School of Medicine
42. St. Mary's Health Center
43. St. John Health System (Providence Park Hospital)

## **New Jersey**

44. University of Medicine and Dentistry of New Jersey (UMDNJ), New Jersey Medical School
45. University of Medicine and Dentistry of New Jersey (UMDNJ), School of Osteopathic Medicine\*

## **New Mexico**

46. University of New Mexico School of Medicine

## **New York**

47. Albany Medical College
48. Albert Einstein College of Medicine of Yeshiva University
49. Columbia University College of Physicians and Surgeons
50. Weill Medical College of Cornell University  
Weill Cornell Medical College in Qatar
51. Mount Sinai School of Medicine
52. New York Medical College
53. New York University School of Medicine
54. State University of New York (SUNY) Downstate Medical Center College of Medicine
55. State University of New York (SUNY) Upstate Medical University
56. Stony Brook University Health Sciences Center School of Medicine
57. SUNY, University at Buffalo, School of Medicine & Biomedical Science

58. University of Rochester School of Medicine & Dentistry
59. The Sophie Davis School of Biomedical Education
60. Charles B. Wang Health Center
61. College of Staten Island
62. Maria College

### **North Carolina**

63. Duke University School of Medicine
64. University of North Carolina at Chapel Hill School of Medicine
65. Wake Forest University School of Medicine

### **Ohio**

66. Wright State University, Boonshoft School of Medicine
67. Miami Valley Career Technology Center

### **Oklahoma**

68. Oklahoma State University Center for Health Sciences\*
69. University of Oklahoma College of Medicine, Tulsa

### **Oregon**

70. Oregon Health & Science University School of Medicine
71. Pacific University
72. Linfield College

### **Pennsylvania**

73. Drexel University College of Medicine
74. Jefferson Medical College of Thomas Jefferson University
75. University of Pennsylvania School of Medicine
76. Philadelphia College of Osteopathic Medicine\*

### **South Carolina**

77. Medical University of South Carolina
78. University of South Carolina School of Medicine

### **Texas**

79. Baylor College of Medicine, Houston
80. University of Texas Medical School, Houston
81. University of Texas Medical School, San Antonio
82. University of Texas Southwestern Medical School, Dallas
83. University of Texas Southwestern OB/GYN Residency, Dallas
84. University of North Texas Health Science Center (UNTHSC), Texas College of Osteopathic Medicine, Fort Worth\*
85. John Peter Smith Hospital, UNTHSC OB/GYN Residency, Fort Worth\*
86. Plaza Medical Center, UNTHSC, Internal Medicine Residency, Fort Worth\*
87. Truett Hospital, Baylor University Medical Center, OB/GYN Residents, Dallas
88. Roberts Hospital, Baylor University Medical Center, Internal Medicine Residency, Dallas
89. Baylor Medical Center, Family Practice Residency, Garland

**Virginia**

- 90. Virginia Commonwealth University School of Medicine
- 91. Medical College of Virginia

**Washington**

- 92. University of Washington School of Medicine
- 93. Everett Community College
- 94. Seattle University
- 95. Gonzaga University
- 96. Bastyr University (Natural Medicine)

**West Virginia**

- 97. Joan C. Edwards Marshall University School of Medicine

**Wisconsin**

- 98. University of Wisconsin School of Medicine and Public Health

\* Indicates school accredited by the American Association of Colleges of Osteopathic Medicine.

**For a current list of schools, please visit [www.ovariancancer.org/STS](http://www.ovariancancer.org/STS)**

## **Nursing, Advanced Nursing & Physician Assistant Programs**

Participating throughout the United States

Updated June 2011

*The program is implemented in a total 40 of physician's assistant programs and nursing school.*

### California

1) Azusa Pacific University, San Diego CA  
Florida

- 2) Florida A&M College of Nursing
- 3) Florida State University College of Nursing
- 4) Nova Southeastern University Physicians Assistant Program
- 5) University of South Florida Nursing
- 6) University of Tampa School of Nursing
- 7) University of Central Florida School of Nursing
- 8) Barry University, Physician Assistants and Nurse Practitioner Program (Pinellas Park)
- 9) Barry University, Physician Assistants and Nurse Practitioner Program (Miami Shores)

### New York

- 10) Adelphi University Nursing Program
- 11) CCNY Physician Assistant Program
- 12) College of Staten Island Nurse Practitioner Program
- 13) Columbia University Nurse Practitioner Program
- 14) Daemen College Physician Assistant Program
- 15) D'Youville College Physician Assistant Program
- 16) D'Youville College of Nursing
- 17) Hunter College CUNY Nurse Practitioner Program
- 18) LeMoyne College Physician Assistant Program
- 19) Long Island University Physician Assistant Program
- 20) Long Island University College of Nursing
- 21) Maria College of Nursing
- 22) Mercy College Physician Assistant Program
- 23) New York University College of Nursing
- 24) Pace College of Nursing
- 25) Pace University/Lenox Hill Hospital Physician Assistant Program
- 26) Rochester Institute of Technology Physician Assistant Program
- 27) Russell Sage Nursing School
- 28) Stony Brook University Physician Assistant Program
- 29) St. John Fisher College Nurse Practitioner Program
- 30) SUNY Brockport College of Nursing
- 31) SUNY Buffalo College of Nursing
- 32) SUNY Downstate College of Nursing
- 33) Touro College Physician Assistant Program
- 34) University of Rochester College of Nursing
- 35) Wagner College Physician Assistant Program
- 36) Wagner College Nurse Practitioner Program

Missouri

37) University of Missouri, Nurse Practitioner Program

Oregon

38) Oregon Health and Science University, School of Nursing

39) University of Portland, School of Nursing

Washington

40) Washington State University, Nurse Practitioner (Vancouver)