

# EHR Integration Discussion Guide for Breast Cancer Risk Assessment Tools

This resource was developed by the American Cancer Society National Breast Cancer Roundtable (ACS NBCRT) to support providers in conducting breast cancer risk assessment. This document outlines key considerations for practices (e.g., OB/GYN practices, primary care practices) and IT departments collaborating to integrate breast cancer risk assessment tools into the electronic health record (EHR). The goal of this resource is to support implementation without disrupting clinical workflows. This discussion guide can be used as a whole or adapted by selecting specific sections that best suit the needs of your practice.

For information on the various breast cancer risk assessment tools, please view the tool features worksheet [\[Link to Tool Table and Excel file here – To be added once the link has been created\]](#).

## EHR Integration and Workflow

- Discuss how the tool will be integrated into the EHR (e.g., embedded calculator, application programming interface, or module).
- Identify key points in the clinical workflow where the tool should be triggered (e.g., annual visits, post-mammogram review).
- Identify how the tool will interact with personalized recommendations for breast cancer screening embedded in the EHR based on patient characteristics.
- Determine how and where risk assessment results will be documented and stored in the EHR.

## Patient Eligibility and Target Populations

- Review the eligibility criteria for each risk assessment tool under consideration.
- Discuss whether different tools will be provided based on patient characteristics (e.g., ethnicity, family genetic history).
- Confirm the criteria providers will use to identify and flag eligible patients [\[Link to Clinic Workflow – To be added once the link has been created\]](#).

## Tool Selection and Clinical Fit

- Review the scope of each tool, such as assessing breast cancer risk or estimating the likelihood of carrying BRCA1/BRCA2 mutations.
- Review the populations for which each tool has been validated and determine clinical relevance.
- Discuss model accuracy and strengths/limitations for the populations served by the organization.

## Data Capture and Input Requirements

- Identify the clinical data inputs required by each tool (e.g., age, family history, breast density).
- Assess whether these inputs are already collected in structured fields (i.e., in a standardized format) or if new documentation workflows are needed.
- Ensure that the tool allows for maximum automatic extraction of relevant information from the EHR.

## Risk Information and Clinical Applications

- Examine the type of risk information the tool provides (e.g., 5-year risk, lifetime risk).
- Discuss how risk scores will inform clinical actions, such as referrals, screening method (mammography, MRI, ultrasound, etc.), screening frequency, or patient counseling.
- Discuss options for patient-facing outputs or printouts to support shared decision-making.

**Example scenario:** A 45-year-old patient with dense breasts and a family history of breast cancer on her mother's side presents for an annual wellness visit. Using an integrated risk assessment tool in the EHR based mainly on comprehensive family history and including breast density as a risk factor, her lifetime risk is calculated at 22%. Based on these results, the provider recommends annual mammography with supplemental breast MRI. The patient's breast cancer screening intervals and modalities are reset within the EHR based on patient risk and clinician recommendations. A printout of the risk summary is generated from the EHR to support a shared decision-making conversation, including discussion of genetic counseling and screening and lifestyle risk reduction strategies.

## Licensing and Accessibility

- Clarify whether the selected tool requires licensing or has use restrictions.
- Review cost and access considerations (e.g., free public versus proprietary tools).

## User Interface and Experience

- Review whether the tool is user-friendly for clinicians and feasible to use during visits.
- Establish a reasonable target duration for completing the assessment, and ensure system design prioritizes minimizing provider time burden.

## Tracking and Evaluation

- Determine how the tool's use will be tracked within the EHR for quality monitoring.
- Define metrics for success, such as completion rates, referrals generated, or detection of high-risk patients.

## EHR Integration Action Plan

**Goal:** Support breast cancer risk assessment implementation without disrupting clinical workflows.

Topic	Action Steps	Person/Team Responsible	Resources Needed	Timeline
EHR Integration and Workflow				
Patient Eligibility and Target Populations				
Tool Selection and Clinical Fit				
Data Capture and Input Requirements				
Risk Information and Clinical Applications				
Licensing and Accessibility				
User Interface and Experience				
Tracking and Evaluation				