

2024 Prevention and Screening Program

Cancer Screening Impact Summary | January 1 – December 31, 2024



This report includes key cancer screening implementation activities and outcomes for the American Cancer Society's 2024 Prevention and Screening Program. **Thank you** for prioritizing cancer prevention and early detection, and for participating in our 2024 project partnership.

Program at-a-glance

154

Projects focused on cancer screening

1,913,174

Screening-eligible patients reached*

▲ 3.6

Average percentage point change for screening rates*

555,133

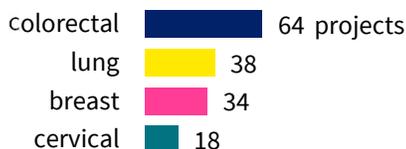
Cancer screenings completed*

7,896

Cancers diagnosed*

*Includes only projects with verified data

Program reach



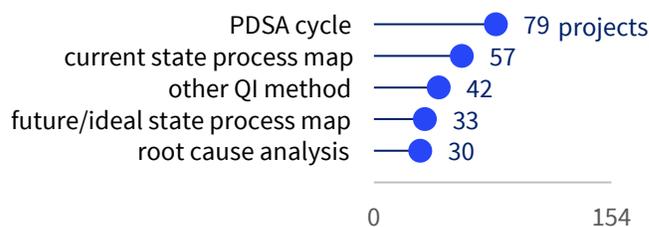
In 2024, **154 projects** focused on improving access to cancer screening. These projects were based in **35 states** and reached **more than 1.9 million screening-eligible people**.

Colorectal cancer screening was the most common project focus.

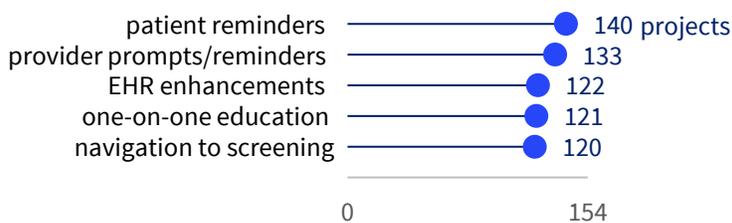
Implementation activities

Health system partners used quality improvement (QI) methods to identify and implement interventions to improve cancer screening. Projects could implement more than one QI method and more than one intervention.

Plan-Do-Study-Act (PDSA) cycle was the most common QI method used.



Following are the 5 most commonly implemented interventions. *This graph does not include all interventions implemented.*



Impact on cancer screening and diagnoses

Across the Prevention and Screening Program projects, cancer screening rates **increased by 3.6 percentage points**, on average, from 41.6% at project baseline to 45.3% at final. This change represents an average 8.9% proportional increase in screening rates. Rate changes varied by project focus (see graph).

Thanks to your work, **more than 550,000** cancer screenings were completed and **nearly 8,000** cancers were diagnosed in 2024. Screening tests can detect cancer before it starts or catch cancer early when it may be easier to treat. Catching cancer early can mean a better chance of survival.

Information in this summary is based on reports health systems submitted to ACS using the Data and Reporting Tool (DART). Note: Screening rates are rounded.

