

Volunteer Manual 2012

Sponsored by:
Derm Education Foundation
DuPage Medical Group
The American Cancer Society

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A Message to our Volunteers

Dear Volunteer,

The DuPage Medical Group has a proud and devoted history of public service. In alliance with the Derm Education Foundation, our passion to serve the community has expanded to new depths. As a volunteer to the *Check Your Skin* program, it is your responsibility to ensure that our commitment to the community continues.

The *Check Your Skin* program is designed to educate the public on the dangers of melanoma. By educating the public about melanoma and other skin cancers, it is our hope that people will learn more about protecting themselves from the sun's harmful rays, and to perform monthly skin self exams. If a melanoma is detected early it is almost certainly curable. However, a late stage melanoma is usually fatal.

Personal contact with the public is the only way to make a difference. In addition to participating in local health fairs, we will be holding educational workshops in the community every spring and summer. Yes, you will be leading workshops in just a few months! But don't worry. Know that you will be very well prepared due to the leadership and expertise of the following individuals.

Dr. Ashish Bhatia, a physician within DuPage Medical Group and an Assistant Professor of Clinical Dermatology at Northwestern University School of Medicine, has fostered the development and implementation of the *Check Your Skin* project through his time, encouragement and expertise. In addition to being the Director of Research for DuPage Medical Group, he also has a successful practice specializing in Mohs Micrographic Surgery, and Laser and Cosmetic Surgery. His warm spirit and dedication to community health promotion has inspired the implementation of the program within the Chicago area. Without his input and direction, the CYS project would not have been possible. Dr. Tania Becke, MPH Clinical Research Physician with DuPage Medical Group, has dedicated her extensive experience with public health to the CYS program. Under her direction, the program gained an important health promotion perspective, firmly grounded in public health methods. Without their generous support, the Check Your Skin program would not be possible.

The Check Your Skin program first began within the Virginia Commonwealth University School of Medicine community under the inspiration of a talented medical student named Seth Forman. Now as a practicing physician, Seth continues to his passion for community service. In addition, the program also benefited from the expertise of public health advisor Millie Becker, MPH and doctor Robert Brodell, associate clinical professor of dermatology at Northeastern Ohio Universities College of Medicine. Finally, the original *Check Your Skin* project owes a great deal of gratitude to Carol L. Hampton, MMS, associate dean of the office of Faculty and Instructional Development.

Together with the strong support from DuPage Medical Group and the Derm Education Foundation, we honorably embark on the task of educating the community on the importance of skin cancer prevention. Have confidence knowing that the Check Your Skin program is firmly rooted within the desire to improve community health, and guided by some of the most talented health professionals in the country. Your participation in this program, and with the community at large, is invaluable. Remember to treat the Check Your Skin program, community members, and fellow volunteers with the utmost respect.

Now it's time to go forth and educate!

Sincerely,

Brandice M. Baranowski, MS

1. Introduction to the *Check Your Skin* Project

1.1 Sponsorship

The *Check Your Skin* project is possible by the Caring for Community grant from the Association of American Medical Colleges. The *Check Your Skin* project is also supported and endorsed by the American Cancer Society. The Medical College of Virginia Alumni Association supports the *Check Your Skin* project on the VCU School of Medicine campus.

1.2 Overview

Skin Cancer is the most frequently diagnosed form of cancer found in the United States and is potentially curable, if found early. In 1997, the American Academy of Dermatology (AAD) and the Center for Disease Control (CDC) met to discuss skin cancer as a national public health problem. The outcome of the meeting was to develop initiatives to increase public awareness and prevention behaviors to reduce skin cancer. The *Check Your Skin* project is the first to mobilize medical students into the community to raise awareness of skin cancer and prevention.

The goal of the *Check Your Skin* project is to reduce the community's risk of melanoma, the deadliest type of skin cancer, by educating the Greater Chicagoland area about skin cancer and prevention. The project will employ various outreach methods: community workshops, and social marketing through Public Service Announcements (PSAs) using TV and radio. Talented volunteers will manage and implement the components of the project. Faculty and residents will serve in advisory positions.

The *Check Your Skin* project's success will serve as a model for other medical schools throughout the Unites States. And, the *Check Your Skin* project through the Derm Education Foundation will assist any school that chooses to start the project in their community

2. Project Descriptions

There are several components to the *Check Your Skin* project designed to raise awareness of skin cancer and prevention. Well-trained volunteers will lead the project pieces under the direction of the guidance of the faculty and project leaders.

2.1 Public Service Announcements (PSAs)

The PSAs will air on the TV, radio and in print in local newspapers. The message of the PSAs is to increase melanoma awareness, introduce the monthly SSE and encourage limited sun exposure. These PSAs were developed specifically for this project and will be consumer tested prior to airing.

As a goal of the CYS program, we plan to organize a 'skin cancer awareness' segment on a local television news stations. Viewers will have the opportunity to speak with *Check Your Skin* volunteers that are seated in the background studio of the evening newscasts. Viewers will be exposed to the *Check Your Skin* workshops and a demonstration of a self-skin examination.

2.2 Monthly Volunteer Conferences

Once a month, the medical students will meet for a presentation or discussion regarding topics surrounding skin, cancer and community outreach and workshop training. The meetings will be organized by the Program leader and faculty advisor to be held on campus.

2.3 Community Outreach & Training Workshops

The workshops will be scheduled for public forums and community centers to accommodate the adult working population on weekends and evenings.

Workshops for children will be scheduled during the day for summer camps, day

care centers and summer schools. Workshops for the elderly will be provided at local nursing homes and assisted living facilities. The workshops will be available free of charge to various settings as a community service effort.

Skin-self exam (SSE) cards will be made available to workshop participants, facilities that host the workshops, the local health departments and physician's practices. The cards will serve as a reminder and teaching tool to perform a SSE on a monthly basis.

The cards have been manufactured through grant funding T.B.A.

2.4 Project Evaluation

The *Check Your Skin* evaluation will be composed of surveys, focus groups and clinical findings to make the assessment. The founders of the project intend to publish findings in a variety of oncology, dermatology and public health journals. Authorship will be to those volunteers significantly involved in the success of the project.

Additionally, there will be annual internal evaluations of our success in motivating the student population, and gaining on campus awareness. After succeeding on our campus, we will assess the viability of founding *Check Your Skin* projects on other medical school campuses.

3. Leadership Positions

There are a variety of leadership positions available in the Check Your Skin project.

There is a president for each medical school class that will be elected by the executive committee. Each medical school class president must also serve as a project leader.

The project leaders and class presidents serve on the executive committee. The faculty advisor, house staff advisor and public health consultant also serve on the executive committee that oversees the grant reapplication process. The executive committee meets formally once a month, but informal contact between members is necessary to ensure that the project objectives are met and documented for funding purposes.

The *Check Your Skin* project is funded by three sources: the Association of American Medical Colleges, the American Cancer Society and the Annual Fund of the Medical College of Virginia Alumni Association. It is critical that the funding continues from year-to-year. Each funding sources requires the fulfillment of different goals. The project leader is responsible for monitoring the progress of the *Check Your Skin* project by documenting that the objectives are achieved and that the project goal is monitored.

The *Check Your Skin* project goal is to successfully implement skin cancer awareness through:

- Social Marketing Campaigns (PSA's and diagnostic cards)
- Skin Cancer Awareness Workshops
- Medical student club

3.1 Check Your Skin Project President and Vice President

The president of the *Check Your Skin* project will be a fourth-year medical student willing to devote the time and energy necessary to insure the success of the project. The student will be expected to take an elective independent month with the faculty advisor in order to prepare print materials, PSA's, and schedule monthly meetings. Essentially, the president is the person who has to make sure everything gets done.

The vice-president will be a second or third year medical student that will assist with project coordination and will likely become president the following year.

3.2 Skin Cancer Awareness Workshop

Community Outreach Leader:

The project leader of the skin cancer awareness workshops is responsible for contacting leaders in the community and arranging locations for skin cancer awareness workshops. The project leader will contact the health department to learn about underserved venues for a workshop, as well as churches, schools, summer camps, nursing homes and other groups. The project leader must contact specific groups that serve minority populations.

Also, the project leader is responsible for assigning one or more volunteers to facilitate the educational workshop. It is important to make the contacts in the community as early as possible in order to allow for scheduling and workshop promotion. Once a contact is made, a volunteer must be assigned to the workshop visit. Then, the volunteer must schedule a time with the community leader and ensure that the workshop will be appropriately promoted.

The skin cancer awareness workshops are the back-bone of the *Check Your Skin* project. It is the most effective way to reach the community on an individual level. In order to be involved with the workshop component of the *Check Your Skin* project, a volunteer is encouraged to conduct at least two workshops per year.

3.3 Media Relations and Publicity Campaign

Media Relations and Publicity Project Leader:

The *Check Your Skin* campaign has been and will continue to be followed by the local media. Maintaining a strong, productive relationship with the media is

critical to our campaign. The *Check Your Skin* campaign will produce 2 to 3 public service announcements (PSA's) per year.

In addition to overseeing the production of the *Check Your Skin* PSA's with the local media station, the Media Relations and Publicity project leader is responsible for arranging a date with the TV stations' news team for the event. The 'Skin Cancer Event' is a time when the viewers can call the station hotline during the evening news for information regarding melanoma, skin cancer and sun exposure. A maximum of fifteen volunteers can participate in the segment. Five volunteers will answer calls per half-hour newscast.

3.4 Website Management and Development Project

Website Project Leader:

The website of the *Check Your Skin* project is www.CheckYourSkin.net. The project leader is responsible for the continued maintenance and development of the website. Also, the leader must continually monitor the traffic volume and respond to visitor feedback. Throughout the year, the website will need updating with news of public events, and any recent advances in melanoma detection, screening treatment and treatment guidelines.

3.5 Clinical Research Project

Research Project Leaders:

We are modeling this *Check Your Skin* project in Chicago, II, with the hope that it will be replicated successfully in other cities. The clinical research team will assess the success of the project by measuring a variety of parameters. The evaluation will determine if this project had an impact on those who participated. All workshop participants will fill out a survey. The survey will measure if their knowledge and attitudes about sun safely and skin cancer improved as a result of the workshop. In addition, we will measure each

participant's level of self efficacy (pre and post) to correctly and consistently perform the Skin Self Exams to assist with early detection.

There are several research questions that could be posed with this project. For example, one way to determine if certain components of the project are a success, like the skin self exam cards is to contact a number of the people that the cards are distributed to and see if they are checking their skin on a monthly basis. Other research questions can be developed and researched with the assistance from the faculty advisors.

4. Fund of Knowledge

The *Check Your Skin* volunteer must be familiar with melanoma facts, frequently asked questions and the correct answers to these questions. The following information has been gathered from the American Cancer Society and the American Academy of Dermatology. Please familiarize yourself with this information.

4.1 2007 Skin Cancer Facts

- $\sqrt{}$ Half of all new cancers are skin cancers.*
- √ Skin cancer is the most common form of cancer in the United States. More than
 1 million new cases of skin cancer will be diagnosed in the United
 States this year.* (1)
- $\sqrt{}$ About 79 % of the new skin cancer cases will be basal cell carcinoma, 15% are squamous cell carcinoma, and 5% are melanoma.
- $\sqrt{}$ Both basal cell carcinoma and squamous cell carcinoma have a better than 95% cure rate if detected and treated early.
- $\sqrt{}$ An estimated 10,590 people will die of skin cancer this year, 7,770 from melanoma and 2,820 from other skin cancers.*
- √ There were be about 105,750 new cases of melanoma in 2005 46,170 in situ (noninvasive) and 59,580 invasive (33,580 men and 26,000 women.)* This is a 10 % increase from 2004. In 2005, at current rates one in 34 Americans have a lifetime risk of developing melanoma.
- √ One American dies of melanoma every hour. In 2005, 7,770 deaths were attributed to melanoma 4,910 men and 2,860 women.* Older Caucasian males have the highest mortality rates from melanoma.
- $\sqrt{}$ The incidence of melanoma more than tripled among Caucasians between 1980 and 2003.
- $\sqrt{}$ More than 73 % of skin cancer deaths are from melanoma.
- $\sqrt{}$ Melanoma is more common than any non-skin cancer among women between 25 and 29 years old.
- √ Melanoma is the fifth most common cancer in men and the sixth most common cancer in women.* **
- $\sqrt{}$ One in Five Americans will develop some form of skin cancer during their lifetime
- $\sqrt{}$ Five or more sunburns double your risk of developing cancer (2)
- $\sqrt{}$ The cost of melanoma in the U.S is more than \$740 million annually. (11)

^{*}Source: American Cancer Society's 2007 Facts & Figures

^{**}Excluding basal cell carcinoma and squamous cell carcinoma, which together are the most common cancers in both sexes.

Teens and Tanning

Ultraviolet radiation (UVR) is a proven human <u>carcinogen</u>, according to the U.S. Department of Health and Human Services. (5)

- $\sqrt{}$ Exposure to tanning beds before age 35 increases melanoma risk by 75%. (7)
- $\sqrt{}$ Nearly 30 million people tan indoors in the U.S. annually; 2.3 million of them are teens. (1)
- √ On an average day in the U.S., more than 1 million people tan in tanning salons;
 70% are Caucasian women aged 16-49. (3)
- √ People who use tanning beds are 2.5 times more likely to develop squamous cell carcinoma and 1.5 times more likely to develop basal cell carcinoma. (4)
- √ Occasional use of tanning beds almost triples the chances of developing melanoma. (4)
- $\sqrt{}$ New high-pressure sunlamps emit doses of UVR that can be as much as 15 times that of the sun. (5)
- $\sqrt{}$ The indoor tanning industry has an estimated revenue of \$5 billion. (2)
- $\sqrt{}$ Up to 90 percent of the visible skin changes commonly attributed to aging are caused by the sun. These changes can be seen as early as in one's 20's. (6)

Sources

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- 6. Taylor CR et al. "Photaging/Photodamage and Photoprotection" *J. of American Academy of Dermatology*, 1990: 22
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4.2 Skin Cancer Risk Factor Quiz

Exposure to the ultraviolet radiation of the sun is the most important fact in determining a person's risk of skin cancer. Past sunburns, sun exposure at young ages, genetics and immune system deficiencies may also play a part.

The following quiz can help determine your risk for developing skin cancer. After you add up your total points, match your score with those noted below to find your risk level:

- 1. _____ Hair Color Blond/red = 4, brown = 3, black = 1
- 2. _____ Eye Color Blue/green = 4, hazel = 3, brown = 2
- 3. _____ When exposed to *one hour* of summer sun, you... Burn, and sometimes blister = 4, burn, then tan = 3, tan = 1
- 4. _____ Where is your job?
 Outdoors = 4, mixed = 3, indoors = 2
- 5. _____ Do you have freckles? Many = 5, some = 3, none = 1
- 6. _____ Has anyone in your family had skin cancer? Yes = 5, no = 1
- 7. ____ Where in the U.S. did you live most before the age of 18? South = 4, Midwest = 3, North = 2

Risk Levels

- 10 15 Below average risk
- 16 22 Average risk
- 23 25 High risk
- 26 30 Very high risk

People with the following characteristics have the highest risk for melanoma:

- √ Fair complexions that burn or blister easily
- √ Blond or red hair
- $\sqrt{}$ Blue, green or gray eyes
- $\sqrt{}$ Excessive sun exposure during childhood and teen years, blistering and sunburns before age 18
- √ Family history of melanoma

 $\sqrt{}$ More than 100 moles; 50 if you are under age 20

Q & As ABOUT MELANOMA

Q. What is melanoma?

A. Melanoma, a very serious skin cancer, is characterized by the uncontrolled growth of pigment-producing tanning cells. Melanomas may suddenly appear without warning, but can also develop from or near a mole. They are found most frequently on the upper backs of men and women or on the legs of women, but can occur anywhere on the body.

The overall incidence of melanoma is rising at an alarming rate. In 2005, current rates claim one in 34 Americans had a lifetime risk of developing melanoma.

Q. Is melanoma a serious disease?

A. More than 80 % of skin cancer deaths are from melanoma. Advanced melanoma spreads to internal organs and may result in death. One person each hour dies from melanoma. If detected in the early stages, melanoma can usually be treated successfully.

Q. How many people will develop melanoma this year?

A. An estimated 105,750 *new* cases of melanoma were diagnosed in the United States in 2005, a 10 % increase from 2004.

In addition, 7,770 people are expected to die from the disease – 4,910 men and 2,860 women. Melanoma is the fifth most common cancer in men and the sixth most common cancer in women.* **

Q. What causes melanoma?

A. Excessive exposure to the ultraviolet radiation of the sun is the most important *preventable* cause of melanoma. People in southern regions, where the sunlight is more intense, are more likely to develop melanoma than those in northern regions. Melanoma has also been linked to excessive sun exposure in the first 10 to 18 years of life. Other possible causes include genetic factors and immune system deficiencies.

Q. Who gets melanoma?

A. Melanoma can strike anyone. Caucasians are ten times more likely to be diagnosed with melanoma than other races. However, even among Caucasians, certain individuals are at higher risk than others. For example:

- $\sqrt{}$ Your chances increase significantly if you've already had one melanoma.
- √ You have a substantially increased risk of developing melanoma if you have many moles, large moles or atypical (unusual) moles.
- $\sqrt{}$ Your risk is increased if your parents, children or siblings have had melanoma.
- √ If you are a Caucasian with fair skin, your risk is four times as great as a Caucasian with olive skin.

- √ Redheads and blondes have a two-fold to four-fold increased risk of developing melanoma.
- $\sqrt{}$ Excessive sun exposure in the first 10 to 18 years of life increases your chances of developing melanoma.

Q. What are atypical moles?

A. Most people have moles (also known as nevi). Atypical moles are unusual moles that are generally larger than normal moles, variable in color, often have irregular borders and may occur in far greater number than regular moles. Atypical moles occur most often on the back and also commonly occur on the chest, abdomen and legs in women. It is important to recognize that atypical moles are not limited to any specific body area -- they may occur anywhere. The presence of multiple atypical moles may mark a greater risk of melanoma developing either in a mole or on apparently normal skin.

Q. What does melanoma look like?

A. Recognition of changes in the skin is the best way to detect early melanoma. Melanoma generally begins as a mottled, light brown to black flat blemish with irregular borders. The blemish is usually at least one-quarter inch in size. It may turn shades of red, blue or white, crust on the surface and bleed. They most frequently appear on the upper back, torso, lower legs, head and neck. A changing mole, a new mole, or a mole that is different or "ugly" or begins to grow requires prompt medical attention.

If you notice a mole on your skin, you should follow the simple ABCD rule which outlines the warning signs of melanoma:

- $\sqrt{}$ **Asymmetry** One half does not match the other half.
- √ Border irregularity edges of the mole are ragged or notched
- √ Color multiple colors may be present (brown, black, pink, red and/or blue)
- $\sqrt{$ **Diameter** increasing over time
- √ Enlargement and other changes any change in a moles such as bleeding, continued itching, crusting and or draining

The American Academy of Dermatology urges everyone to examine his or her skin regularly. This means looking over your entire body including your back, your scalp, the soles of your feet, between your toes and the palms of your hands.

If there are any changes in the size, color, shape or texture of a mole, the development of a new mole, or any other unusual changes in the skin, see your dermatologist/physician immediately.

Q. Can melanoma be cured?

A. When detected in its earliest stages, melanoma is highly curable. The average five-year survival rate for individuals with melanoma is 92 %, a 4% increase from 2001. For localized melanoma, melanoma that has not spread beyond the outer layers of the skin

at the time of detection, the average five-year survival rate is 98 %. Approximately 83 % of melanomas are diagnosed at a localized stage.*

When detected early, surgical removal of thin melanomas can cure the disease in most cases. Early detection is *essential;* there is a direct correlation between the thickness of the melanoma and survival rate. Dermatologists recommend a regular self-examination of the skin to detect changes in its appearance. Additionally, patients with risk factors should have a complete skin examination by a dermatologist annually. Anyone with a changing or new mole or blemish should be examined immediately.

Q. Can melanoma be prevented?

A. Because overexposure to ultraviolet light is thought to be a primary cause of many melanomas, dermatologists recommend the following precautions:

- $\sqrt{\ }$ Avoid "peak" sunlight hours -- 10 a.m. until 4 p.m. -- when the sun's rays are the strongest.
- √ Seek shade whenever possible. Remember "No shadow…seek the shade!" If your shadow is shorter than you are, the damaging rays of the sun are at their strongest and you're likely to sunburn.
- √ Apply a broad spectrum sunscreen with a Sun Protection Factor (SPF) 15 or higher, apply 15 - 30 minutes before going outdoors and reapply every two hours, especially when playing, gardening, swimming or doing any other outdoor activities. Sunscreens should not be used to increase the time spent in intense sunlight or instead of protective clothing.
- √ Wear protective clothing, including a wide-brimmed hat, sunglasses and longsleeved shirt and pants during prolonged periods of sun exposure.

** Excluding basal cell carcinoma and squamous cell carcinoma, which together are the most common cancers in both sexes.

^{*}Source: American Cancer Society's 2007 Facts & Figures

4.3 Sun Safety Tips

PROTECT YOURSELF FROM THE SUN

- $\sqrt{}$ Apply a broad-spectrum sunscreen with a Sun Protection Factor (SPF) of at least 15.
- $\sqrt{}$ Reapply sunscreen every 2 hours when outdoors, even on cloudy days.
- √ Wear protective, tightly woven clothing, such as a long-sleeved shirt and pants.
- $\sqrt{}$ Wear a wide-brimmed hat and sunglasses when outdoors.
- $\sqrt{}$ Stay in the shade whenever possible.
- √ Avoid reflective surfaces, which can reflect up to 85 % of the sun's damaging rays.
- $\sqrt{}$ Protect children. Minimize sun exposure and apply sunscreen to children aged 6 months and older.
- $\sqrt{\ }$ No shadow...seek the shade! If your shadow is shorter than you are, you're likely to sunburn.
- $\sqrt{}$ Avoid tanning beds.

The sun's rays are the strongest between 10 a.m. and 4 p.m.

*The *Check Your Skin* project endorses the use of sunscreen to prevent squamous cell carcinoma and basal cell carcinoma. Sunscreen has not been proven to prevent melanoma. Therefore, the only proven protection from the sun's effects on the development on melanoma is to avoid the sun.

4.4 Skin Test Quiz: Test Your Knowledge About Skin Cancer

The following quiz is a test of how much you know about skin cancer. It is designed to help you learn more about it and how to prevent it.

	designed to help you learn more about it and how to prevent it.
1. Skir True False	n cancer is the most common form of cancer in the United States.
of	e development of a new mole or a change in an existing one may be a sign ancer.
3. Pec True False	ople with dark skin can't get skin cancer.
4. You True False	u can't die from skin cancer.
	u have an increased risk of melanoma if your parents, sibling or children had melanoma.
6. If yo True False	ou stay out of the sun, you will never get skin cancer.
7. Me True False	lanoma, a serious type of skin cancer, cannot be cured.
8. Me True False	lanoma can occur anywhere on your body.
9. Rec True False	dheads and blondes are more likely to get melanoma.

10. If you were born with one or more moles, you are more likely to develop melanoma.

True

False

Skin Test Quiz Answers

1. TRUE: Skin cancer is the most common form of cancer in the United

States with about 1 million new cases in 2005.

2. **TRUE**: The development of a new mole or any changes in the size, color,

shape or texture of a mole may be a sign of skin cancer and should be

reported to a dermatologist or personal physician right away.

3. **FALSE**: Anyone can get skin cancer. Darker skinned people have more

melanin, a brownish pigment, in their skin which serves as a buffer by absorbing

ultraviolet rays, thereby lowering, but not eliminating,

the risk of skin cancer.

4. **FALSE**: This year 9,800 Americans will die from melanoma, which is

responsible for six out of seven skin cancer deaths.

5. **TRUE**: Your risk is increased if your parent, child or sibling has had

melanoma.

6. **FALSE**: Even though there is a strong correlation between ultraviolet exposure to

the sun and all types of skin cancer, you can still get skin cancer if you stay

out of the sun. It is important to regularly

examine your skin for signs of cancer regardless of how much sun

you get.

7. **FALSE**: When treated in its earliest stage, melanoma can be cured.

8. **TRUE**: Melanomas can develop anywhere on the body, even places that are not

exposed to the sun, such as the soles of the feet.

TRUE: Redheads and blondes have a two-fold to four-fold greater risk of

developing melanoma.

10. **TRUE**: Most moles develop some time after birth, but some people are

born with moles. "Birth Moles" increase a person's risk for melanoma.

5. COMMUNITY PROMOTIONAL MATERIALS

The following community promotional materials can be used to contact community organizations to host Skin-Self-Exam workshops. Copies can be made for free through the Department of Dermatology.

5.1 Sample Community Contact Letter

Check Your Skin Project

Derm Education Foundation

(Date)

Dear (Name):

Skin cancer is the most common form of cancer in the United States with about 1 million new cases diagnosed each year. Fortunately, most skin cancers, including melanoma, can be cured if detected early.

The volunteers of the Derm Education Foundation are facilitating skin cancer educational workshops called *Check Your Skin* during the spring and summer of 2007 in the Chicagoland area. The *Check Your Skin* workshops are <u>free of charge</u> and designed to educate the public about the dangers of melanoma and other skin cancers. By educating the public about skin cancer, it is our hope that people will learn more about the dangers of melanoma, protecting themselves from the sun's harmful rays, and performing monthly skin-self examinations. The workshop will cover topics such as: melanoma awareness, skin cancer risk factor awareness and instruction on, how to perform monthly skin self-examinations.

The *Check Your Skin* Project is not a screening program. Our volunteers will not be assessing, examining or diagnosing any skin lesions on participants. Melanoma and other skin cancers can only be diagnosed by doing a biopsy at a physician's office. We are focused on increasing the public's awareness of melanoma and other skin cancers.

I am contacting you to solicit your organization's interest in hosting a *Check Your Skin* workshop at the (insert organization name).

Enclosed is background material as well as information on our local skin cancer workshop program.

I'll be calling you shortly to determine your interest in hosting a *Check Your Skin* workshop. The workshop will last about an hour. In the meantime, if you have any questions, you can reach me at (xxx-xxx-xxxx) between the hours of ____ and ___ and view the Check Your Skin Web site at www.checkyourskin.net.

Thank you for your consideration. Enclosed is information that will be distributed at the workshops.

Sincerely, (Your Name)

Sunny Weather is on its way...

Learn how to have

A safe summer

Protect yourself from the sun

Date:?

Time:?

Where:?

A workshop to learn about:

 $\sqrt{\rm Skin}$ Cancer early detection, $\sqrt{\rm If}$ you are at risk $\sqrt{\rm How}$ to perform skin self-examinations

Free gifts and refreshments

*Facilitated by volunteers of the

Derm Education Foundation

For more information, contact: ?

5.3 Thank you for hosting a Skin Self Exam Workshop

Check Your Skin <i>Project</i> Derm Education Foundation

(date
Dear (contact person):
On behalf of the Check Your Skin project through the Derm Education Foundation and the American Cancer Society, we would like to thank you for hosting a skin cancer educational workshop on (date). We are pleased to be providing the Chicagoland area with important health information that could potentially save lives.
The Check Your Skin project will be present in the Chicagoland area for years to come. Next year, we would like to come back and provide this important information about skin cancer and prevention to your organization again. Please let us know if you have any suggestions or feedback so that we could improve the quality and delivery of our workshops.
We look forward to working with you again. If you would like more information about skin cancer to have on hand, please let us know.
Thank you again.
(name)

6. The Skin-Self Examination Workshop

Workshops are to be held throughout the Chicagoland area reaching diverse groups of people of all ages. The Community Outreach leader is: (name) (email address). (name) will help you chose a location for your workshop.

How to initiate a workshop:

Please use the sample community contact letter. A copy of the letter will be made available on a disk for you. Once, you've made a contact at an organization, that person can suggest the best day and time to hold a workshop. Please assure the contact person that you are able to accommodate any number of participants at the workshop.

Promoting the workshop:

Please use the sample promotional skin-self-exam workshop flyer. A copy of the flyer will be made available on a disk for you. Flyers can be mailed to the organization for community promotion. Offer the organization promotional materials for their newsletter, bulletin board and other website.

Workshop supplies:

Please sure to have the following items to facilitate your worksho	op:
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- √ Workshop location directions
- √ Thank you note
- √ Mirror
- √ Red dot stickers
- $\sqrt{}$ Poster of skin cancer pictures
- √ Handouts
- $\sqrt{}$ Skin-self-exam cards
- √ Evaluations
- $\sqrt{}$ Stamped and addressed envelop to mail responses back to:

Derm Education Foundation							

Workshop outline:

The educational workshop is designed to last 40 minutes with time for questions after the formal discussion and demonstration. The entire program is planned to last a total of 60 minutes.

Tips:

- $\sqrt{}$ Before the workshop, ask your contact person the # of people likely to participate.
- √ Make sure you have enough surveys, information packets and skin-self examination cards. Always bring more supplies than expected!
- √ You should arrive at the site **fifteen to thirty minutes prior** to the scheduled workshop. Arrange to meet with the contact person prior to the workshop.
- √ Make sure to get the contact person's phone # in case there is any confusion once you are on site.
- √ Familiarize yourself with the room. If there is no obvious seating arrangement, try to arrange the seats in a circle.
 - 1. Begin by letting the participants know that you are (first name), a Derm Education Foundation volunteer.
 - 2. That this workshop is part of the **Check Your Skin** project, which is a community wide effort to educate people in our Chicagoland area about skin cancer and ways to be safe in the sun.
 - 3. Tell them that their knowledge of skin safety will improve by the end of the hour.
 - 4. Have them fill out the pre-workshop survey to assess their baseline knowledge of skin cancer and return them to you.

For confidentiality reasons: Each workshop will be given a number. Please have participants write that number along with the number you assign to each individual participant. The second survey should have the same individual participant number given to the same person. Providing a name, e-mail address and/or phone number is optional, and will only be used for research purposes in the future.

- 5. What you will be covering during the workshop is helpful information about skin cancer, how the sun can affect their chances of developing skin cancer and demonstrating and encouraging the participants to perform skin-self examinations each month.
- 6. After you collect the pre-program surveys, hand out the **Check Your Skin** program information packet. The information will be very similar to

workshop manual **Fund of Knowledge** section. Take time to review the information. Allow people to ask questions. Answer questions as directly

and honestly as possible. But, never, NEVER NEVER DIAGNOSE A

PERSON AT A WORKSHOP

Commonly asked questions with their appropriate answers

Q: "Doc, what is this thing on my hand?"

A: "The only way to know for sure is to take a biopsy at a physician's office. Please make an appointment with your physician to further investigate your concerns."

Q: "Doc, my wife works at MCV, and she has this thing that kinda' looks like, um, well, you know, I can't really describe it...is it cancer?"

A: "The only way to know for sure is to take a biopsy at a physician's office. Please make an appointment with your physician to further investigate your concerns."

Q: "Can I show you this thing on my back? My husband says it might be cancer."

A: "The only way to know for sure is to take a biopsy at a physician's office. Please make an appointment with your physician to further investigate your concerns."

The take home message is that we are not qualified to make a diagnosis of skin cancer. The only way to diagnose any skin cancer is to take a biopsy and have the specimen evaluated by a pathologist. Please do not reassure or scare any of the people at the workshop. The *Check Your Skin* project is a public education program, not a screening program. You are there to present the facts and encourage people to change certain behaviors.

- 7. Review poster pictures of skin cancers.
- 8. Discuss how participants can monitor their skin by checking it every month using a mirror. Hand out the monthly skin-self exam reminder cards and demonstrate how to do a monthly skin exam. Make sure to go over the cards and explaining the ABCDs of checking moles.
- 9. After doing the demonstration, distribute the post-program surveys.
- 10. Make sure that each participant has the **same number** as they used for their first survey. Collect the surveys. At the end, thank the group and offer that

people stay to ask questions and have refreshments. Some people may come up with questions they may have been too embarrassed to ask in the group setting. **Mail the surveys in as soon as possible**

11. If possible, at the end of the program, thank your contact for hosting the workshop and remind them that you are **interested in coming again next year.** Remember the **CYS** program is expected to continue every year.

POINTS TO REMEMBER!

*People may have trouble understanding how to use mirrors to check hard to see places. Demonstrate how a person may check their back, axilla, groin or bottom of their feet with a hand-held mirror. Use red dot stickers and place them on these areas and show people how easy it can be to examine these areas. We will try to have hand-held mirrors provided. Also, explain that a hand-held mirror and a full-length mirror can be used to see places the way a barber shows you the back of your head after a hair cut.

*People may also have trouble with the instruction at the bottom asking them to check under their nails and under hair. This does not mean remove nails to check under them, or to shave areas that may have melanoma. It means just examining their nails regularly for any spots that do not progress with regular nail growth. And, a person can examine places covered with hair by just parting it and looking in the mirror.

7. Volunteer Feedback

The **Check Your Skin** project can only strive for perfection – not attain it. Therefore, your input on the workshops, media relations, publicity campaign, research, website and general project organization is required for improvement.

Please make your concerns, ideas, and opinions known to the officers of the *Check Your Skin* project. Your input is not only appreciates, it is critical.

8. Community Partners

Kinko's

9. Faculty Advisory Board

Ashish C. Bhatia, MD, Department of Dermatology, DuPage Medical Group, Assistant Professor of Clinical Dermatology at Northwestern University Tania Becke, M.P.H, MD, Department of Research, DuPage Medical Group Peri Todd, Director of Research, DuPage Medical Group

Project Leader

Mikhenan Horvath, M.S. Brandice M. Baranowski, M.S Jane Singh, B.S. Student Advisory Board (2007)