Rectal cancer accounts for approximately 25-30 percent of all colorectal cancer cases. The treatment of rectal cancer is complex and little is currently known about practice patterns for rectal cancer care in Canada. It is unclear how much variation exists in the delivery of rectal cancer care in different geographic regions and clinical environments. We have performed a preliminary survey of general surgeons in Atlantic Canada regarding practice patterns for rectal cancer and achieved a response rate of 72%. This study identified variation in the management of low rectal cancer, the use of transanal excision, indications for neoadjuvant/adjuvant therapies, and the use of post-operative surveillance investigations. Based on our preliminary study, we hypothesize that there may be important discrepancies in practice patterns for rectal cancer care across geographic regions and clinical environments in this country. Our objective is to determine the current practices of general surgeons in Canada with regards to pre-operative staging investigations, the management of low rectal cancer, the use of adjuvant and neo-adjuvant therapies and post-operative surveillance for patients with rectal cancer.

The brief mail survey will be sent to all practicing General Surgeons in Canada. It will take approximately seven minutes to complete and addresses the issues described above. Data regarding surgeon demographics and knowledge of quality indicators in rectal cancer care will be collected.

These data will be used to determine if variability exists in the self-reported delivery of rectal cancer care in Canada. These results of this study may help guide future quality assurance initiatives and improve patient care and outcomes.