

Colorectal Cancer Screening

Screening tests...should I?	Yes	No
Are you 50 years old?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a family history (see back page)	<input type="checkbox"/>	<input type="checkbox"/>
Do you smoke	<input type="checkbox"/>	<input type="checkbox"/>
Do you eat a high fat diet?	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered yes to at least one of the above, please read below.

Risk Factor	Recommendations	Alternative recommendations
Persons at Average Risk Average risk persons are defined as age 50, a normal physical exam, absence of symptoms, absence of family history of colorectal cancer or colorectal polyps, and no evidence of microscopic blood within the stool (fecal occult blood test cards) on 3 sequential tests.	Colonoscopy every 10 years starting at age 50	Annual fecal occult blood tests (3) plus sigmoidoscopy every 5 yr. If annual fecal occult blood test cards are positive for blood, a colonoscopy should be performed regardless of the number of cards that are positive.
Moderately Increased Risk Moderately increased risk persons are defined as those persons with one first-degree relative (mother, father, or sibling) with colorectal cancer diagnosed at age 60 or older.	Colonoscopy every 10 years starting at age 40	Annual fecal occult blood tests plus sigmoidoscopy every 5 yr.
High Risk Individuals High-risk persons are defined as those persons with two or more first-degree relatives (mother, father or sibling) with colorectal cancer diagnosed at age less than 60	Colonoscopy starting at age 40 or 10 years less than the youngest affected relative (whichever is earlier). Colonoscopy should be repeated every 3 to 5 years.	No alternative screening modalities are considered adequate.

Have you had a screening test for:

Female

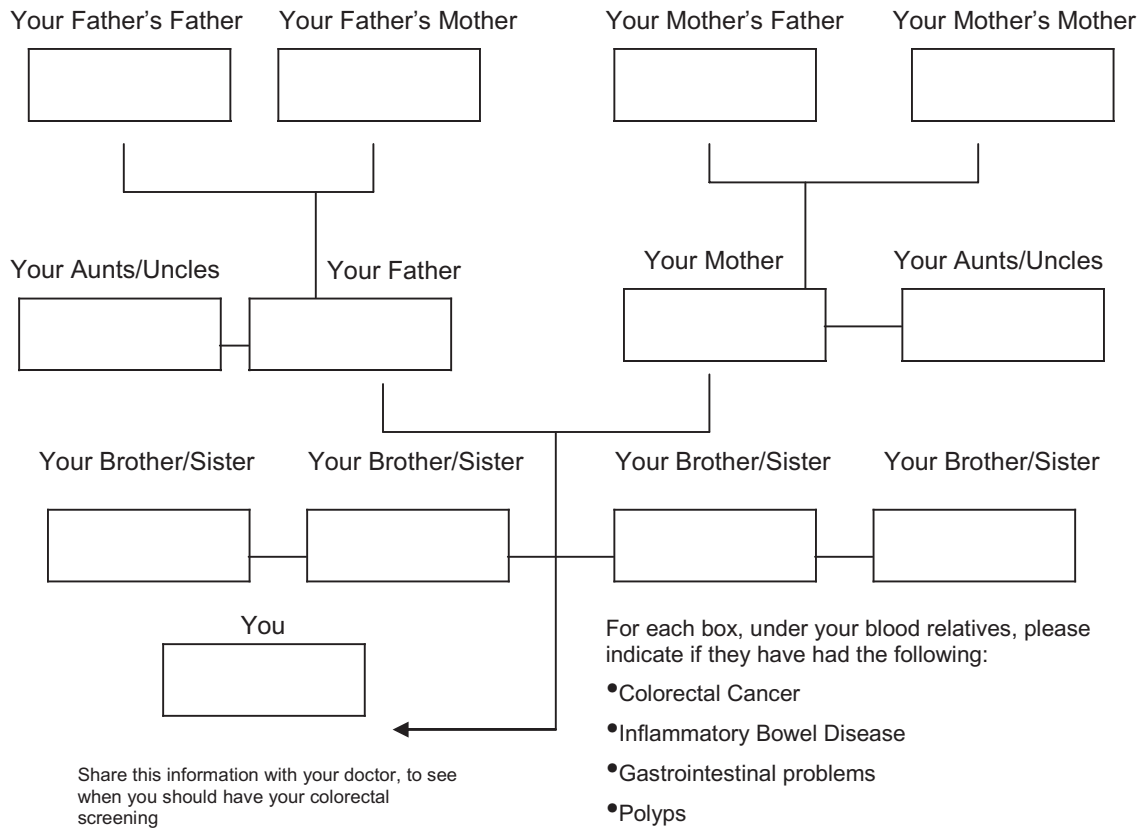
Breast (mammogram)
 Cervix (PAP smears)
 Oral cavity (mouth exam by HCP*)
 Skin (full body exam)

Male

Prostate (PSA and Digital Rectal Exam)
 Skin (full body exam)
 Testes (physical exam by HCP*)
 Oral cavity (mouth exam by HCP*)

*HCP Healthcare Professional

Family History



Your Father's Father Your Father's Mother Your Mother's Father Your Mother's Mother

Your Aunts/Uncles Your Father Your Mother Your Aunts/Uncles

Your Brother/Sister Your Brother/Sister Your Brother/Sister Your Brother/Sister

You

Share this information with your doctor, to see when you should have your colorectal screening

For each box, under your blood relatives, please indicate if they have had the following:

- Colorectal Cancer
- Inflammatory Bowel Disease
- Gastrointestinal problems
- Polyps