

## TARGET POPULATION

Asymptomatic men and women of all ages

## EXCLUSIONS

Men and women with signs or symptoms suggesting colorectal cancer (CRC)

## RISK ASSESSMENT

- ✓ Assess risk for colorectal cancer (CRC) for all men and women to determine when to start screening, the appropriate screening test and frequency
- X DO NOT wait for patient to turn 50 years of age to assess risk for CRC
- ✓ Assess for indicators of increased risk including family and/or personal history of colorectal cancer, colonic adenomas or inflammatory bowel disease, and high risk CRC conditions, i.e., Lynch syndrome, familial adenoma polyposis

## AVERAGE RISK POPULATION

### ***50 TO 74 YEARS OF AGE***

- ✓ Screening is recommended every one to two years with the **Fecal Immunochemical Test (FIT)**
- ✓ If the FIT result is positive, promptly refer for a colonoscopy. Use local CRC screening program (see [Appendix A](#)) or endoscopist, depending on available resources
- ✓ Wait 10 years after a normal colonoscopy to start or re-start screening with FIT. If the quality of the colonoscopy was uncertain, start or re-start screening with FIT five years after the colonoscopy

### ***75 YEARS OF AGE AND OLDER***

- X As a general practice, DO NOT screen asymptomatic patients with a life expectancy of less than 10 years and no family or personal history of colorectal neoplasia
- ✓ Discuss the risks and benefits of screening with the patient. The decision to screen should be individualized, based on informed patient preference, and between the patient and his/her physician

## WHEN NOT TO USE FIT\*

- X DO NOT use as a diagnostic test for CRC in **symptomatic** patients (e.g., reported bloody stools or recent change in bowel habit)
- X DO NOT use to determine or exclude a cause for anemia

- X DO NOT use as a CRC screening test when the patient has an acute gastrointestinal condition and/or where bleeding is occurring or highly likely such as inflammatory bowel disease, acute gastroenteritis or C. difficile colitis, actively bleeding hemorrhoids or anal fissure

\*See the Alberta Colorectal Cancer Screening Program flow chart – Does My Patient Need a FIT?  
[http://www.screeningforlife.ca/resources/Colorectal%20Cancer%20Resources/Healthcare%20Provider%20Resource/Flow%20Chart:%20Does%20my%20Patient%20Need%20a%20Fecal%20Immunochemical%20Test%20\(FIT\).pdf](http://www.screeningforlife.ca/resources/Colorectal%20Cancer%20Resources/Healthcare%20Provider%20Resource/Flow%20Chart:%20Does%20my%20Patient%20Need%20a%20Fecal%20Immunochemical%20Test%20(FIT).pdf)

## CRC SCREENING PROGRAMS

### ***EDMONTON ZONE***

SCOPE Program: Edmonton AB T5K 0C0

Phone 780.735.3235

Fax 780.735.1061

Email [scope@albertahealthservices.ca](mailto:scope@albertahealthservices.ca)

Website <http://www.albertahealthservices.ca/services.asp?pid=saf&rid=1092770>

### ***CALGARY ZONE***

Forzani and MacPhail Colon Cancer Screening Centre:

Teaching, Research and Wellness Building (TRW)

6th Floor, 3280 Hospital Drive NW

Calgary AB T2N 4N1

Phone 403.944.3800

Website: <http://www.albertahealthservices.ca/ccsc.asp>

### ***SOUTH ZONE***

Lethbridge and Area Colorectal Cancer Screening Program

2100 11 Street

Coaldale AB T1M 1L2

Phone 403.345.7009

Fax 403.345.2698

Medicine Hat Colorectal Cancer Screening Clinic

666 5th Street SW

Medicine Hat AB T1A 4H6

Phone 403.529.8016

Fax 403.528.5644

## GENERAL RESOURCES

Colorectal Cancer Screening: [www.screeningforlife.ca/colorectalcancer](http://www.screeningforlife.ca/colorectalcancer)

CancerControl Alberta: [www.albertahealthservices.ca/8109.asp](http://www.albertahealthservices.ca/8109.asp)

Post Polypectomy Surveillance Guidelines available at: [www.albertahealthservices.ca/1751.asp](http://www.albertahealthservices.ca/1751.asp)