

Cancer Screening Recommendations

| Cancer | Screening Test (s) | Recommended for whom, what age, how often? |
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| Breast | <ul style="list-style-type: none"> - Mammogram (x-ray of breast) - MRIs due to family history, genetic tendency, or other factors (usually a small # of women) -Ultrasound -New and experimental imaging tests -Biopsy if tests listed above potentially show cancer | <ul style="list-style-type: none"> -Age 40-44: choice to start annual screening with mammograms -Age 45-54 should mammograms yearly -Age 55+ switch to mammograms every 2 years or continue yearly - All women familiar with benefits, limitations, potential linked of screening |
| Colon | <ul style="list-style-type: none"> - Stool based test: signs of cancer in a person's stool ((ever 1-3 years) - Visual exam (colonoscopy): exam that looks at colon and rectum (every 3-10 years) -If test other than colonoscopy, abnormal test result needs to be followed up with colonoscopy and possible be screen more often than 3 years | <ul style="list-style-type: none"> -For people at average risk, screening at age 45 of stool test or colonoscopy. If in good health and with a life expectancy of more than 10 years, should continue regular screening through 75 -Age 76-85, talk with HCP about screening continuation -Age 85+ no screening |
| Prostate | <ul style="list-style-type: none"> -If abnormal results, biopsy, digital rectal exam (DRE), specific PSA, imaging test of prostate gland -Prostate-specific antigen (PSA) blood test | <p>Men at age: -50 talk about pros and cons of testing</p> <ul style="list-style-type: none"> -If African American or have a father or brother who had prostate cancer before age 65 should have talk with HCP starting at 45 instead of 50 -If not cancer is found, men who choose to be tested who have a PSA of less than 2.5ng/mL may only need to be retested every 2 years; yearly for men whose PSA level is 2.5ng/mL or higher. |
| Cervical | <ul style="list-style-type: none"> - HPV test alone - HPV test combined with Pap test - Pap test alone | <ul style="list-style-type: none"> -Age 25: should start -Age 25-65: primary HPV test every 5 years; if not available, a co-test that combines HPV with a Pap test every 5 years or Pap test alone every 3 years -Age over 65: had have regular screening in the past 10 years of normal results, no CIN2, or more serious Dx within the past 25 years should stop screening and not restart. -People who have had a total hysterectomy should |

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| | | <p>stop screening unless it was done as treatment for cervical cancer or serious pre-cancer. Those with supra-cervical hysterectomy should continue screening.</p> <p>-Those who have been vaccinated against HPV should also follow guidelines for their age groups.</p> <p>-If Hx of serious pre-cancer, continue testing for at least 25 years after condition was found, even if testing goes past age 65.</p> |
| <p>Lung</p> | <ul style="list-style-type: none"> - Low dose CT (LDCT) scan - Chest x-rays - CT scan - CT scan combined with PET - PET scan - Magnetic fields (MRI) - Sound waves - Radioactive substances - Bone scan | <p>-Yearly screening for ages 50-80 who smoke or used to smoke and have at least a 20 pack-year Hx of smoking</p> <p>-Should not be screened if have serious health problems that limit life expectancy, or if they won't be able to/want to get Tx if lung cancer is found</p> |