

Cancer Screening Recommendations

Cancer	Screening Test (s)	Recommended for whom, what age, how often?
Breast	Mammogram Breast MRI (used for women at high-risk)	<p>“Average” risk women → no personal/family hx of breast cancer, no chest radiation therapy, or no presence of genetic mutation that increases risk</p> <ul style="list-style-type: none"> • Ages 40 – 44 → option to begin screening 1x a year • 45 – 54 → should get mammograms 1x a year • 55+ → 1x a year, or can switch to every other year (screening should continue for as long as the woman is in good health/has a life expectancy of 10+ more yrs) <p>Higher-risk women → should get BOTH a mammogram and Breast MRI</p> <ul style="list-style-type: none"> • Women who have a first-degree relative with the gene mutation and have not undergone genetic testing themselves. • Have had radiation therapy to chest under age of 30 • Have a known BRCA1/BRCA2 genetic mutation • Based on risk assessments, listed as a higher risk (based on family hx, etc.) • Self/first-degree relatives with Have Li-Fraumeni syndrome, Cowden syndrome, or Bannayan-Riley-Ruvalcaba syndrome
Colon	Stool-based tests (check feces for signs of colorectal cancer) <ul style="list-style-type: none"> • Fecal immunochemical test (FIT) • Guaiac-based fecal occult blood test (gFOBT) • Multitargeted stool 	<p>“Average” risk men → considered men who do not have any personal/familial history of colorectal cancer, inflammatory bowel disease (ulcerative colitis/Crohn’s disease), confirmed/suspected hereditary colorectal cancer syndrome (familial adenomatous polyposis [FAP] or Lynch syndrome [hereditary non-polyposis colon cancer or HNPCC]), or getting radiation to</p>

	<p>DNA/RNA tests</p> <p>Visual exams (checking inside the colon/rectum for any abnormalities)</p> <ul style="list-style-type: none"> • Colonoscopy • CT colonography (virtual colonoscopy) • Sigmoidoscopy <p>Blood-based tests (checking blood for signs of colorectal cancer)</p> <ul style="list-style-type: none"> • Shield • ColoHealth (previously Epi proColon) 	<p>the abdomen/pelvic area to treat prior cancer</p> <ul style="list-style-type: none"> o Start screening at age 45 <p>People in good health & life expectancy 10+ years → continue regular colorectal cancer screening through the age of 75</p> <p>People ages 76 through 85 → screening is based on person’s preferences, life expectancy, health, and past history on screening</p> <p>People over 85 → no need for screening (shouldn’t get it)</p>
<p>Prostate</p>	<p>Blood-based test (Prostate-specific antigen [PSA])</p> <ul style="list-style-type: none"> • Can include other PSA tests such as: • Prostate Health Index (PHI) • 4Kscore test • IsoPSA/Percent-free PSA • [Other lab tests, such as: ExoDx Prostate(IntelliScore) or SelectMDx] <p>Digital rectal exam (DRE)</p> <p>Imaging of the prostate gland (ie: MRI)</p> <p>Obtaining a biopsy of the prostate</p>	<p>Although it won’t tell you for sure you have cancer, men can discuss undergoing the screening process with their providers. If they choose to proceed, any <i>abnormal</i> screening test results → you will need a biopsy of the prostate to confirm a cancer dx (Any man can get a blood test</p> <ul style="list-style-type: none"> • (Important to consider that some risk factors such as riding a bike, ejaculation, certain medications, older age, enlarged prostate, prostatitis, and certain urologic procedures can RAISE PSA point in blood, and other factors such as herbal mixtures, 5-alpha reductase inhibitors, and other meds can LOWER PSA point in blood) • < 4 ng/mL PSA point in blood: won’t require any further testing (men without prostate cancer) • 4 -10 ng/mL PSA point in blood: 1 in 4 chance of having prostate cancer; “borderline range” • > 50 ng/mL PSA point in blood: 50% likelihood of having prostate cancer
<p>Cervical</p>	<p>HPV test</p> <p>PAP (Papanicolaou) test</p>	<p>Regular screening exams (through pelvic exams → you are able to do both HPV and PAP test during a pelvic exam</p> <ul style="list-style-type: none"> • Screening should start at the age of 25, should be for women between the ages of 25-65 <ul style="list-style-type: none"> o Primary HPV test is recommended for

		<p>individuals between the ages of 25-65 every 5 years (can do it with a PAP test every 5 years and a secondary HPV test)</p> <ul style="list-style-type: none"> o PAP test on its own every 3 years • Women over the age of 65: can stop screening if they have had normal results in the previous 10 years & no hx of CIN2/no serious dx in past 25 yrs
Lung	Low-dose CT (LDCT) scan	<p>YEARLY screening for individuals btwn the ages of 50 – 80 yrs old who:</p> <ul style="list-style-type: none"> • Are a present/former smoker • AND have at least a 20 pack-year hx of smoking <p><i>(20 Pack-year = 1 pack/day for an entire year x 20 yrs, or 2 packs/day x10 yrs)</i></p>