

Colon Screening Program

Does my Patient Need Colon Screening?

Please work down the following list for decision-making. Does your patient have:

Decision-Making Checklist	Recommendation	Refer to Program
1 Symptoms of: <ul style="list-style-type: none"> Anemia Rectal bleeding Abdominal pain Change in bowel habits 	 FIT is not recommended. Refer to a specialist for consideration of endoscopic evaluation after initial investigations.	Do not refer to Colon Screening Program.
2 Personal history of colorectal cancer	 FIT is not recommended. Refer for ongoing follow-up with a specialist.	
3 Inflammatory bowel disease <ul style="list-style-type: none"> Crohn's Ulcerative proctitis Ulcerative colitis 	 FIT is not recommended. Refer for ongoing follow-up with a specialist.	
4 Personal history of precancerous lesion(s)	 FIT or colonoscopy is recommended. Refer to the Colonoscopy Follow-up Algorithm for the recommended pathway. The algorithm can be found at the following link: screeningbc.ca/health-professionals/colon/resources .	If patient is younger than 74, depending on the recommendation, either refer for colonoscopy using the Colonoscopy Referral Form or refer for FIT using the Standard Outpatient Lab Requisition .
5 Family history of colorectal cancer <ul style="list-style-type: none"> 1 first degree relative (parent, full sibling, child) diagnosed with colorectal cancer over 60; 	 FIT is recommended. Screen with FIT every 2 years between ages 50-74.	Use Standard Outpatient Lab Requisition : select 'FIT (Age 50-74 asymptomatic q2y) Copy to Colon Screening Program'.
<ul style="list-style-type: none"> 1 first degree relative diagnosed with colorectal cancer under age 60; or, Two or more first degree relatives with colorectal cancer diagnosed at any age. 	 FIT is not recommended. Colonoscopy is recommended every 5 years. Colonoscopy can start at age 40 or 10 years younger than the age of diagnosis of the youngest affected first degree relative - whichever is earliest.	If patient is younger than 74, refer for colonoscopy in the Colon Screening Program using the Colonoscopy Referral Form .
6 Did the patient have a normal: <ul style="list-style-type: none"> FIT within 2 years; Colonoscopy within 10 years; or, CT colonography within 5 years? 	 FIT is not recommended. Patient is up to date with colon screening.	Do not refer to Colon Screening Program.
7 Patient has never screened for colorectal cancer, does not have a family history, or screening interval has elapsed <ul style="list-style-type: none"> Patient between the ages of 50-74 	 FIT is recommended. Screen with FIT every 2 years.	Use Standard Outpatient Lab Requisition : select 'FIT (Age 50-74 asymptomatic q2y) Copy to Colon Screening Program'.
<ul style="list-style-type: none"> Patient between ages 40-49 and 75-84 	 Individually assess risk of colorectal cancer and risk of colonoscopy. Harm can outweigh benefit; use clinical judgement. If proceeding with screening, use standard lab requisition and select 'FOBT, Other Indication'. Patient will not be registered in program. Refer directly to a specialist for follow-up when indicated.	Do not refer to Colon Screening Program.
<ul style="list-style-type: none"> Patient younger than 40 or older than 84 	 Screening not recommended for these age groups.	