

Colon Screening Program

Fact Sheet for Health Care Providers



BC Cancer Agency

CARE + RESEARCH

An agency of the Provincial Health Services Authority

The new provincial Colon Screening Program is an organized population-based program aimed at reducing colorectal cancer incidence and mortality in BC^{1,2,3}.

Who is recommended for screening?

Screening is recommended for **asymptomatic women and men ages 50 to 74** living in BC. The risk for developing colorectal cancer increases substantially from age 50. There is little evidence that supports screening outside the 50 to 74 age range⁴.

The Screening Tests

Average risk - fecal immunochemical test (FIT)

FIT is recommended for average risk colorectal cancer screening. The FIT yields approximately 88% sensitivity and 90% specificity for detecting colorectal cancer⁵. Furthermore, FIT is able to detect advanced adenomas with a sensitivity of approximately 55%⁵. There are also no dietary or medication restrictions for FIT which will assist uptake and test completion⁶.

Screening interval: FIT every two years for individuals at average risk.

What you should know: Health care providers should complete the Standard Outpatient Lab Requisition (select Fecal occult blood, age 50-74, asymptomatic q2y) and instruct patients to take the form to a participating lab to pick up their FIT kit.

Higher than average risk - screening colonoscopy

Screening colonoscopy is recommended for individuals at higher than average risk for developing colorectal cancer, defined as having one of the following:

- One first degree relative diagnosed with colorectal cancer diagnosed under the age of 60; or,
- Two or more first degree relatives with colorectal cancer diagnosed at any age; or,
- A personal history of adenoma(s).

Screening interval:

- Colonoscopy every five years for patients with family history of colorectal cancer.
- Colonoscopy in five years after a patient has low risk adenoma(s) identified.
- Colonoscopy in three years after a patient has high risk adenoma(s) identified.

What you should know: Health care providers should complete the Colon Screening Program Colonoscopy Referral Form and fax it to the Program at 1-604-297-9340. For patients with a personal history of adenoma(s), please attach previous colonoscopy and pathology reports.

The Colon Screening Program is not recommended for the following individuals:⁷

- Are up to date for colon screening:
 - FIT in the preceding two years or colonoscopy or flexible sigmoidoscopy in the preceding 10 years for average risk patients.
 - Colonoscopy in the preceding five years for patients at higher than average risk.
- Have a personal history of colorectal cancer, ulcerative colitis or Crohn's disease. These patients should continue to obtain care through their specialist or health care provider.
- Currently have symptoms, e.g. rectal bleeding, persistent change in bowel habits, abdominal pain, unintentional weight loss or iron deficiency anemia. These patients should be referred to a specialist, no FIT required.
- Are on a definite surveillance plan through a specialist.
- Are in poor health - if a patient is not medically fit to undergo colonoscopy, then they should not undergo FIT.

CONTACT US

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Patient Pathway

Eligibility

1 PATIENT visits HEALTH CARE PROVIDER

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2 HEALTH CARE PROVIDER assesses eligibility

✗ NOT ELIGIBLE

- Symptomatic
- Up to date with colon screening - patient should wait for next recommended interval
- Has a personal history of colorectal cancer or have ulcerative colitis or Crohn's disease - patient should continue to obtain care through their specialist or health care provider

✓ ELIGIBLE

- Asymptomatic women and men ages 50 to 74.

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3 HEALTH CARE PROVIDER assesses risk

AVERAGE RISK PATIENT: FIT

Patients who do not have high risk characteristics as below should be referred for the fecal immunochemical test (FIT).

Complete **Standard Outpatient Lab Requisition Form** (select **Fecal occult blood, age 50-74, asymptomatic q2y**) and provide to patient.*

HIGHER THAN AVERAGE RISK PATIENT: COLONOSCOPY

Higher than average risk patients are defined as those having one of the following:

- One first degree relative diagnosed with colorectal cancer under the age of 60; or,
- Two or more first degree relatives with colorectal cancer diagnosed at any age; or,
- A personal history of adenoma(s).

Complete Colon Screening Program **Colonoscopy Referral Form** and fax to BC Cancer Agency at **1-604-297-9340**.* For patients with a personal history of adenomas, attach previous colonoscopy and pathology reports.

FIT

1 PATIENT picks up FIT from LAB

Patient brings Standard Outpatient Lab Requisition to any BC public or private outpatient labs to obtain FIT kit.

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2 PATIENT completes FIT at HOME

Test instructions included in each kit.

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3 PATIENT drops off completed FIT at LAB

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4 LAB RESULTS sent to HEALTH CARE PROVIDER and BC CANCER AGENCY

NORMAL FIT RESULT

- BC Cancer Agency sends results to patient and recalls patient for screening in two years.

ABNORMAL FIT RESULT

- BC Cancer Agency sends results to patient
- **NOTE:** Do not repeat FIT if positive. All patients should proceed to an assessment for colonoscopy.

* Patients are registered in the Colon Screening Program by the use of the Standard Outpatient Lab Requisition (selecting the 'Fecal occult blood, age 50-74, asymptomatic q2y (copy to Colon Screening Program)') or the Colon Screening Program Colonoscopy Referral Form.

The Program will refer your patient to the Health Authority for necessary follow up or recall them at the appropriate interval.

Colonoscopy

1 BC CANCER AGENCY facilitates referral to PATIENT's Health Authority

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2 PATIENT COORDINATOR completes pre-colonoscopy assessment with PATIENT

NOT ELIGIBLE FOR COLONOSCOPY

- Patient coordinator advises health care provider that colonoscopy is not proceeding.

ELIGIBLE FOR COLONOSCOPY

- Patient coordinator books patient for colonoscopy.

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3 COLONOSCOPIST performs colonoscopy on PATIENT

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4 HEALTH CARE PROVIDER receives colonoscopy results, pathology report and any recommendation for surveillance or follow-up

NORMAL / NO ADENOMAS FOUND

- BC Cancer Agency recalls average risk patient for FIT in 10 years.
- BC Cancer Agency recalls patients with family history for colonoscopy in five years.

ADENOMA IDENTIFIED

- Low risk adenoma: BC Cancer Agency recalls patient for colonoscopy in five years.
- High risk adenoma: BC Cancer Agency recalls patient for colonoscopy in three years.

CANCER OR IBD DETECTED

- Patient is no longer followed by the program. Colonoscopist arranges or refers back to health care provider for follow-up.

References

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