COLORECTAL CANCER SCREENING Preventable. Treatable. Beatable.

"No matter which one you choose, the importance thing is to be tested." - American Cancer Society

> Colorectal cancer screening guidelines state that **testing should begin at age 45** for men and women. Colorectal cancer usually develops slowly, over 10 to 15 years, sometimes with no symptoms at all. If on-time screenings occur, **colorectal cancer is preventable and treatable.** If diagnosed in early stages, with better recovery times, less extensive treatment, and lower health care costs. There are several screening test options available, including non-invasive and minimal prep options that can be done in the comfort of your own home.

Busy schedule? Worried about COVID-19? Don't avoid your health screenings! Let's work together to get screenings back on track. See the list below and speak to your health care provider about the best option for you.

STOOL-BASED TESTS				
	FECAL IMMUNOCHEMICAL TEST (FIT)	STOOL DNA TEST: COLOGUARD®		
What is it?	A stool-based Fecal Immunochemical Test (FIT) looks for trace amounts of blood in your stool.	The Stool DNA test looks for blood and DNA markers associated with colon cancer.		
Where do I go?	Performed in the comfort of your home and sent to a lab.	Performed in the comfort of your home and sent to a lab.		
How often do I need to have it done?	Every year, if normal.	Every three years, if normal.		
What do I need to do?	Collect a stool sample and mail to lab.	Collect stool sample and mail to lab.		
Anything else I should know?	A positive test means that a diagnostic colonoscopy is required.	This screening test is covered by most, but not all insurances. A positive test means that a diagnostic colonoscopy is required.		



VISUAL TESTS

	COLONOSCOPY	FLEXIBLE SIGMOIDOSCOPY	VIRTUAL COLONOSCOPY (CT COLONOGRAPHY)
What is it?	An exam where a thin, long, flexible tube (colonoscope) is inserted into the rectum. A video camera at the tip of the tube allows the doctor to view the inside of the entire colon.	An exam where a thin, flexible tube (sigmoidoscope) is inserted into the rectum. A video camera at the tip of the tube allows the doctor to view the bottom portion of the colon for polyps.	A CT scan that takes detailed pictures of the colon and rectum to look for polyps and cancer.
Where do I go?	An outpatient surgery center or hospital.	An outpatient surgery center or hospital.	An outpatient radiology center or hospital.
How often do I need to have it done?	Every 10 years, if normal.	Every five years, if normal.	Every five years, if normal.
What do l need to do?	Bowel prep and a driver are required due to sedation.	Sedation is not always needed; bowel prep is required.	Bowel prep is required.
Anything else I should know?	Polyps (precancerous growths) are able to be removed during the exam and sent for testing.	This procedure looks at less than half of the colon and rectum. A positive test means that a diagnostic colonoscopy is required.	This screening scan is covered by most, but not all insurances. A positive test means that a diagnostic colonoscopy is required.

Remember: It does not matter which option you choose. What matters is that you get screened.



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