Screening Tests At-A-Glance

Colorectal Cancer Screening Saves Lives



The U.S. Preventive Services Task Force, a group of medical experts, recommends that men and women who are 45 to 75 years old be screened for colorectal cancer.

The decision to be screened between ages 76 and 85 should be made on an individual basis. If you are older than 75, talk to your health care provider about getting screened.

Each test has advantages and disadvantages. Talk to your health care provider about the pros and cons of each test, and how often to be tested.

Test	Preparation	What Happens?
Stool Tests Three stool tests can be done at home: Guaiac-based fecal occult blood test (gFOBT) Fecal immunochemical test (FIT) FIT-DNA (or stool DNA) test	Your health care provider may recommend that you follow a special diet before taking the gFOBT.	For the gFOBT and FIT tests, you receive a test kit from your health care provider. At home, you use a stick or brush to obtain a small amount of stool. You return the test to the health care provider or a lab, where stool samples are checked for blood. How often: Once a year. For the FIT-DNA test, you collect an entire bowel movement and send it to a lab to be checked for changes in the DNA that might suggest the presence of cancer or a precancerous polyp. How often: Every 3 years.
Flexible Sigmoidoscopy (Flex Sig) This is sometimes done in combination with FIT.	Your health care provider will tell you what foods you can and cannot eat before the test. The evening before the test, you use a strong laxative and/or enema to clean out the colon.	During the test, the health care provider puts a short, thin, flexible, lighted tube into the rectum. This tube allows the health care provider to check for polyps or cancer inside the rectum and lower third of the colon. How often: Every 5 years, or every 10 years with a FIT every year.
Colonoscopy Colonoscopy may be used for screening and may also be used as a follow-up test if one of the other screening tests finds anything unusual.	Before this test, your health care provider will tell you what foods you can and cannot eat. The evening before the test, you use a strong laxative to clean out the colon. Some health care providers recommend that you also use an enema. During this test you will be given medicine that will make you drowsy. Make sure you arrange for a ride to and home from the clinic, as you may not be allowed to drive for as long as 24 hours.	You will receive medication during this test to make you more comfortable. This test is similar to flex sig, except the health care provider uses a longer, thin, flexible, lighted tube to check for polyps or cancer inside the rectum and the entire colon. During the test, the health care provider can find and remove most polyps and some cancers. How often: Every 10 years (for people who do not have an increased risk of colorectal cancer).
CT Colonography (Virtual Colonoscopy)	You prepare for this test as you would for a colonoscopy. Before the test, you follow a special diet and use a strong laxative to clean out the colon.	Virtual colonoscopy uses X-rays and computers to produce images of the entire colon. The images are displayed on a computer screen for the health care provider to analyze. How often: Every 5 years.

Your health care provider will discuss your test results with you. Depending on your results, you may need a follow up appointment or another screening test.



https://www.cdc.gov/cancer/colorectal/ Call 1-800-CDC-INFO (1-800-232-4636) For TTY, call 1-888-232-6348