

## What is cancer screening?

Checking for cancer (or for conditions that may become cancer) in people who have no symptoms is called cancer screening. Screening can help doctors find and treat several types of cancer early. Examples of cancer screening tests are the mammogram for breast cancer, colonoscopy and FIT (Fecal Immunochemical Test) for colon cancer, the Pap smear and HPV (human papillomavirus) tests for cervical cancer, the DRE (digital rectal exam) for anal cancer, low-dose computed tomography (also called a low-dose CT scan or LDCT) for lung cancer, and PSA (prostate-specific antigen) tests for prostate cancer. Screening can also include checking for a person's risk of developing an inherited disease by doing a genetic test.

## Why should I be screened for cancer?

Screening can detect cancer early which is important because when abnormal tissue or cancer is found early, it may be easier to treat. By the time cancer symptoms appear, cancer may have begun to spread to other organs in the body making it harder to treat.

**Individuals should discuss the cancer screening guidelines with their health care provider to determine their screening needs.**

## Cancer Screening

The U. S. Preventive Services Task Force (USPSTF) is an organization of doctors and disease experts who research the best ways to prevent diseases and to make recommendations on how doctors can help patients avoid diseases or find them early. The following are the USPSTF cancer screening recommendations by age group.

Type of Cancer	Age	Sex	Tests	Frequency
Breast	40-49	Female	Mammogram	Discuss with doctor about annual screening.
	50-74	Female	Mammogram	Every 1-2 years.
	75+	Female	Mammogram	Discuss with doctor.
Cervical	21-65	Female	Pap test Pap test and HPV test	If normal results, every 3 years. If normal results, every 5 years.
	65+	Female	Talk to your doctor.	
Colorectal	45-75	Male, Female	Fecal occult blood test (alternative to colonoscopy)	Annually
			Sigmoidoscopy	Every 5 years
			Colonoscopy	Every 10 years
			CT Colonography (Virtual colonoscopy)	Every 5 years
Lung	50-80	Male, Female	Low-dose computed tomography (LDCT)	Annually for people who: <ul style="list-style-type: none"> <li>• Have a 20 pack-year<sup>1</sup> or more smoking history.</li> <li>• Smoke now or have quit within the past 15 years.</li> </ul>
Ovarian	No reliable screening is available for ovarian cancer in women who do not have any signs or symptoms. Discuss with your doctor any changes that are not normal and could be a sign of ovarian cancer.			
Prostate	Younger than 55	Male	Prostate specific antigen (PSA) test	Discuss testing with your doctor if you are high-risk or have a family history.
	55-69	Male	PSA test	Depends on results.
Skin	Any	Male, Female	No recommendation for routine screening. Report any unusual moles or changes in your skin to your doctor and discuss if you are at increased risk of skin cancer.	

<sup>1</sup> A pack-year is smoking an average of one pack of cigarettes per day for one year. For example, a person could have a 20 pack-year history by smoking one pack a day for 20 years or two packs a day for 10 years.

## What questions should you ask your health care provider about cancer screening?

- What cancer screenings are recommended for someone my age?
- How often should I get cancer screenings?
- Where can I get my cancer screenings done?
- How do I schedule my screening tests?
- Will my screening tests be covered by my health insurance?
- What will the screening tests cost if they are not covered by insurance?

## What information should I collect for my family history?

- Who had cancer and what specific kinds did they have?
- How old were they when they were diagnosed with cancer?
- Are they still living? If not, at what age did they die and what caused their death?

## How do I collect family health history information?

You can enter your family health history into My Family Health Portrait at <http://kahuna.clayton.edu/jqu/FHH/html/index.html> . Update it over time and print it out to share with your doctor and relatives.

## Family Health History and Cancer

Learn your family’s health history and share it with your doctor. Your family health history is a record of diseases and conditions that run in your family that can affect your risk of getting cancer.

Gather information about yourself and your blood relatives, including parents and grandparents, aunts and uncles, sisters and brothers, nieces and nephews, and children.

If you have a family history of breast, ovarian, uterine, or colorectal cancer, you may have a higher risk for developing these cancers. Tell your doctor if:

- A relative was diagnosed before age 50 with uterine, breast, or colorectal cancer.
- Two or more relatives on the same side of the family were diagnosed with uterine, breast, or colorectal cancer.
- A female relative was diagnosed with ovarian cancer.
- A male relative was diagnosed with breast cancer.
- You have an Eastern European or Ashkenazi Jewish ancestry.

Telling your doctor about your family health history is the first step in finding out if you may have a higher cancer risk. It could help you and your doctor decide what tests you need to screen for cancer, when to start, and how often to be tested. Knowing your family health history also helps you and your doctor decide if genetic counseling or testing may be right for you.

## Screening Record

The following table is provided to record your specific screening needs based on discussions with your health care provider.

Type of Cancer	Screening Interval	Most Recent Screening Date	Next Screening Date
Colorectal			
Breast			
Cervical			
Lung			
Prostate			
Skin			