

Colorectal Cancer Screening Guidelines 2009 – 2010

I. Guideline

- **When to Begin Screening**

- Begin screening for colorectal cancer at age 50
- Individuals who are at high risk for developing colon cancer should be screened earlier and more frequently in consultation with a specialist in this area

- **When to Stop Screening**

- All screening should be individualized based on age, medical condition, and co-morbidity, and may not be appropriate for individuals with a limited life expectancy. Thus, screening may be discontinued late in life.

- **Screening Options**

- USPSTF¹ Evidence Grade A Methods Only
 1. Colonoscopy every 10 years
 2. Flexible sigmoidoscopy* every five years (combining with FOBT every 1 - 3 years offers greater protection than sigmoidoscopy alone)
 3. Fecal occult blood test (FOBT)* yearly by one of the following methods:
 - high sensitivity guaiac-based test
 - Fecal Immunochemical Test (FIT)

¹ USPSTF- United States Preventive Services Task Force * Colonoscopy recommended for any positive test

II. Source U. S. Preventive Services Task Force, October 2008

III. Guideline Research

1. U.S. Preventive Services Task Force (2008)
USPSTF Grade A screening recommendations: fecal occult blood testing, flexible sigmoidoscopy, and colonoscopy
2. Colorado Clinical Guideline Collaborative (2009)
USPSTF Grade A screening recommendations: fecal occult blood testing, flexible sigmoidoscopy, and colonoscopy

IV. References

[Screening for Colorectal Cancer](#), USPSTF, October 2008, Agency for Healthcare Research and Quality website

[CCGC Colorectal Screening Recommendations](#), CCGC 2009, CCGC website