

# COLON CANCER PREVENTION | RISK ASSESSMENT AND SCREENING FORM

**PATIENT INSTRUCTIONS:** 1. Complete this form. 2. Talk to your health care provider about your risks and screening options.

## PATIENT INFORMATION

How old are you? \_\_\_\_\_

Were you ever screened for colon cancer?  No  I don't know  Yes

If yes,

How were you screened?  Colonoscopy  Stool-based (fecal) test  Other \_\_\_\_\_

When was your last screening?  Less than one year ago  One to nine years ago  10 or more years ago

## RISK QUESTIONS

### Screening History:

1. Have you ever received a diagnosis of colon cancer or rectal cancer?  No  I don't know  Yes

2. Has a colon or rectal polyp ever been found?  No  I don't know  Yes

### Symptoms:

Have you ever had any of the following symptoms?

3. Bleeding from your rectum or blood in your stool  No  I don't know  Yes

4. Change in bowel movements such as constant constipation, frequent diarrhea or change in type of stool  No  I don't know  Yes

5. Unexplained weight loss  No  I don't know  Yes

6. Abdominal or rectal pain that does not go away  No  I don't know  Yes

### Personal and Family History:

Have you ever received a diagnosis of an inflammatory bowel disease?

7. Ulcerative colitis  No  I don't know  Yes

8. Crohn's disease  No  I don't know  Yes

Have you or your biological parent, sibling or child ever been diagnosed with:

9. Familial adenomatous polyposis (FAP)  No  I don't know  Yes

10. Hereditary non-polyposis colon cancer (HNPCC) or Lynch syndrome  No  I don't know  Yes

11. Has your biological parent, sibling or child ever been diagnosed with colon cancer, rectal cancer, or polyps in the colon or rectum?  No  I don't know  Yes

12. If yes,

Which relative(s)?  Biological parent  Biological sibling  Biological child  I don't know

Age(s) at diagnosis? \_\_\_\_\_

**For more information on colon cancer:**

Visit [nyc.gov/health](http://nyc.gov/health) and search for "colon cancer" or call 311.

Ask your health care provider for a colon cancer prevention or colon cancer screening locations brochure.



**PROVIDER INSTRUCTIONS:** Review the form to help you assess the patient's individual risk and screening options. Answering 'yes' to any of the questions above indicates that the patient may be at increased risk; consult a specialist for screening recommendations. Patients who answer 'no' to all of the risk questions may be at average risk and may be eligible for any of the recommended screening options.

# REDUCE YOUR RISK AND GET SCREENED FOR COLON CANCER

## What is colon cancer?

Colon (or colorectal) cancer occurs in the large intestine (colon) or rectum. It is the second leading cause of death from cancer for New Yorkers.

## What is your risk for colon cancer? When should you begin screening?

Determining your risk is an important step to colon cancer screening. We encourage most adults to ask their health care provider about colon cancer screening starting at age 45. However, some people may need to get an earlier or more frequent screening due to certain risk factors, like having a history of colon cancer or precancerous polyps in the family. Tell your health care provider if your biological parents, siblings or children have or had colon cancer or polyps, rectal cancer or any other cancers. You can also help protect your family by sharing your cancer or polyp history with your family. This will help them know their risk factors and when to get screened.

Even if you are under 45 years old, it is important to recognize colon cancer symptoms and your individual risk based on your family history. Don't ignore potential symptoms at any age. Tell your health care provider if you experience blood in your stool, persistent abdominal or rectal pain, or unexplained weight loss. Colon cancer may not cause symptoms right away. If you are eligible for screening, you should get screened even if you feel healthy.

## Screening Options to Detect or Prevent Colon Cancer

Routine screening can prevent colon cancer or help find it early, when treatment often works best. Talk with your health care provider about your screening options.

NYC Health Department recommended colon cancer screening test options include:

- ▶ A visual test that looks for signs of cancer in the colon or rectum
  - **Colonoscopy:** Small tube with a light and camera is inserted into the rectum to look for polyps
- ▶ Stool-based tests\* that look for signs of cancer in stool (feces)
  - **Fecal immunochemical test (FIT):** Patient provides one small stool sample which is tested for signs of blood
  - **High-sensitivity guaiac-based fecal occult blood test (HSgFOBT):** Patient provides several stool samples which are tested for signs of blood
  - **Multi-target stool DNA test (FIT-DNA):** Patient provides one stool sample which is tested for blood and abnormal DNA

\* These tests require a timely follow-up colonoscopy for people who have an abnormal result.

## Payment

Most insurance plans, including Medicaid and Medicare, cover colon cancer screenings starting at age 50. Coverage for screening varies for people between ages 45 and 49, depending in part on their colon cancer risk. Consult with your health care provider and insurer about coverage before your screening test.

If you do not have insurance, you may be eligible to sign up for low- or no-cost coverage. Call **311** or text "**CoveredNYC**" to **877-877** for free enrollment assistance.

If you are unable to obtain insurance, you may be eligible for low- or no-cost screening. Visit [nyc.gov/health](https://nyc.gov/health) and search for "**colon cancer**" to learn more.