

## Algorithm 1: Screening of individuals at Average Risk

### Asymptomatic<sup>1</sup> Men and Women Ages 50-74 Years

No personal history of :

- colorectal adenomatous polyps
- colorectal cancer
- inflammatory bowel disease

**AND**

No family history of colorectal cancer

- FOBT every 1-2 years
  - If positive refer for colonoscopy<sup>2</sup>
- OR**
- Flexible sigmoidoscopy<sup>3</sup> every 5 years
  - colonoscopy<sup>2</sup> is recommended as the follow-up test for patients with abnormal results
- OR**
- Double contrast barium enema<sup>4</sup> every 5 years
  - Colonoscopy<sup>2</sup> is recommended as the follow-up test for patients with abnormal results
- OR**
- Colonoscopy<sup>2</sup> every 10 years

## Algorithm 2: Screening of individuals at Moderate Risk

### Asymptomatic<sup>1</sup> Men and Women

Any 1st degree relative with colorectal cancer diagnosed <60 years  
**OR**  
2 or more 1st degree relatives with colorectal cancer diagnosed at any age (if not a hereditary syndrome)

Colonoscopy every 5 years commencing at age 40 or 10 years younger than the earliest case in the family, whichever comes first

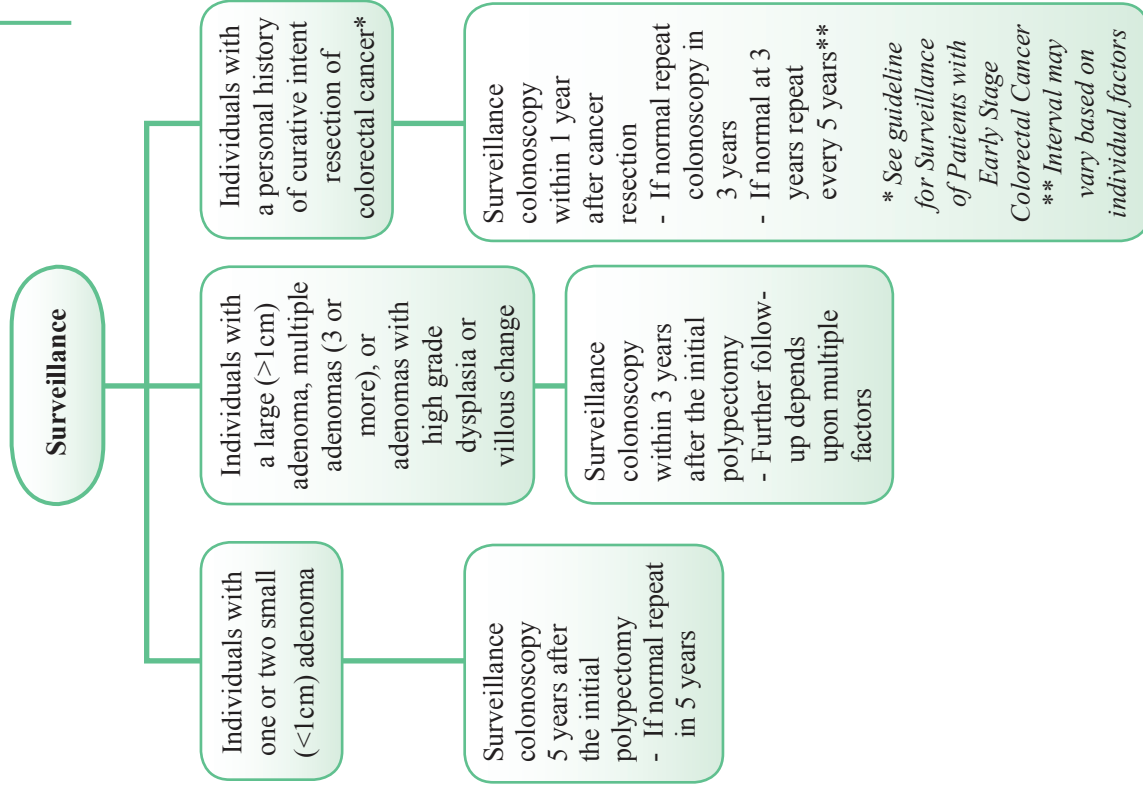
One 1st degree relative with colorectal cancer diagnosed 60 years or older

Same as for average risk but commencing at age 40

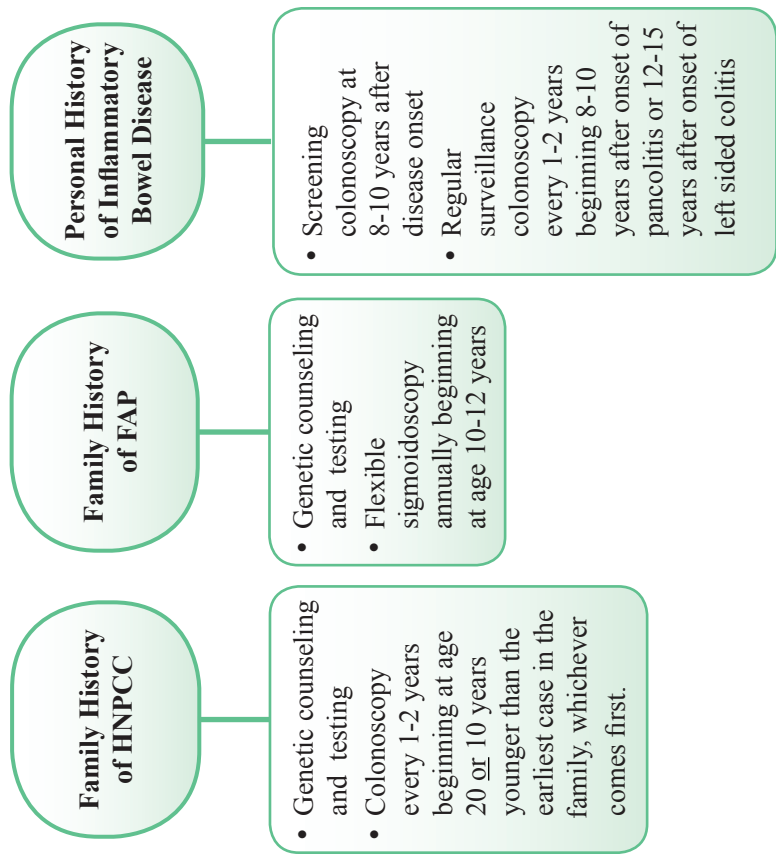
### Notes

1. If the patient is symptomatic, diagnostic workup is recommended.
2. If colonoscopy is negative then no further screening tests are required for the next ten years
3. Flexible sigmoidoscopy may be used in conjunction with FOBT every 1-2 years.
4. This test is now uncommonly used for colorectal cancer screening in Alberta.

### Algorithm 4: Surveillance of Individuals with a Personal History of Colorectal Cancer/Polyps



### Algorithm 3: Screening of Individuals at High Risk for Colorectal Cancer



**CANCER GENETICS CLINIC**

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