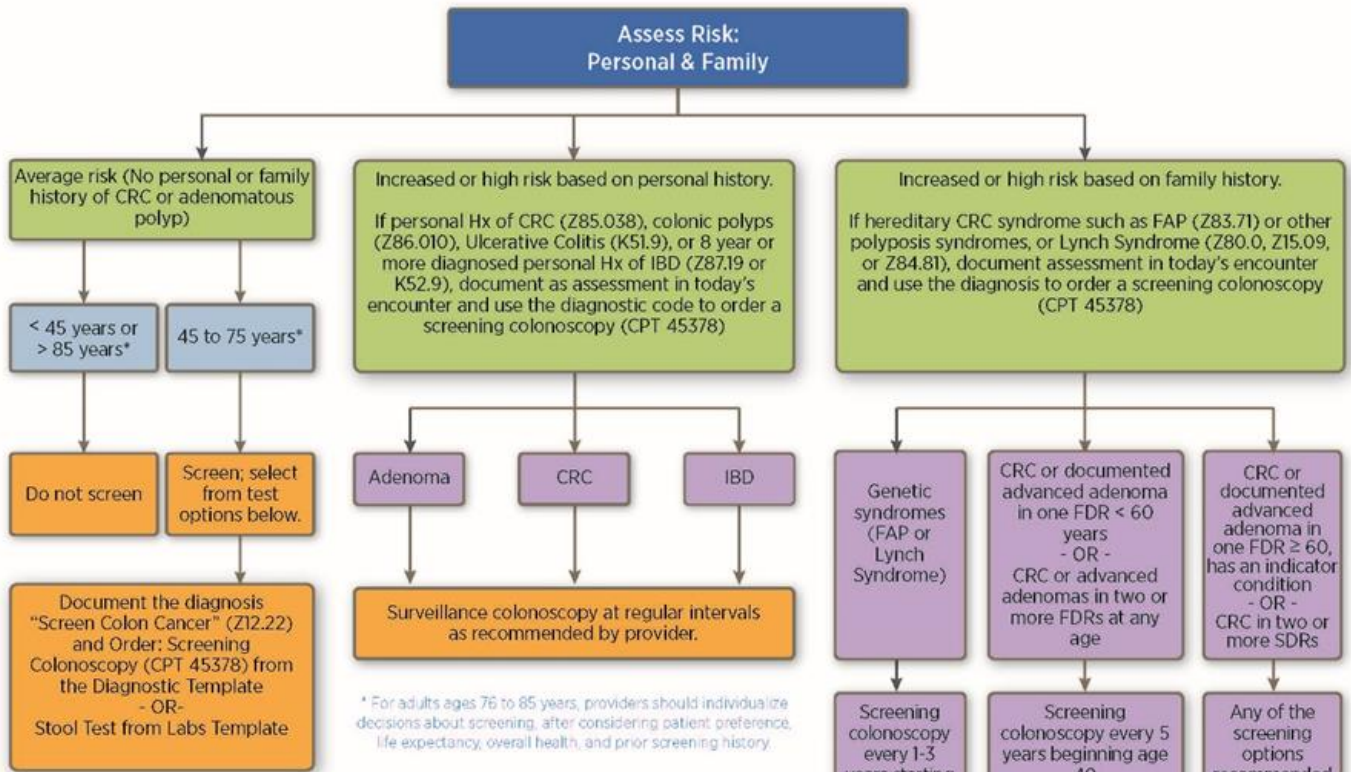


Sample Colorectal Cancer Screening Algorithm

Per the June 2021 USPSTF and May 2018 American Cancer Society Guidelines



SCREENING OPTIONS

Stool-Based Tests

- Yearly fecal immunochemical test (FIT)*, or
- Multi-target stool DNA (FIT-DNA) every three years, or
- Yearly high-sensitivity guaiac test (HS-gFOBT)*

* Stool samples obtained by digital rectal exam (DRE) have low sensitivity for cancer (missing 19 of 21 cancers in one study) and should **never be used for CRC screening**.

All patients who undergo a test other than colonoscopy as a first-line screening exam and receive a positive test result must follow up with a colonoscopy to complete the screening process.

Direct Visualization Tests

- Colonoscopy every 10 years, or
- CT colonography (virtual colonoscopy) every 5 years, or
- Flexible sigmoidoscopy every 5 years

For Medicare patients, use G codes:

- G0105 - Colonoscopy (high risk)
- G0121 - Colonoscopy (not high risk)
- G0328 - Fecal Occult Blood Test (FOBT), immunoassay, 1-3 simultaneous
- G0464 - Colorectal cancer screening: stool-based DNA and fecal occult hemoglobin (e.g., KRAS, NDRG4 and BMP3)

DEFINITIONS

- IBD:** inflammatory bowel disease
- CRC:** colorectal cancer
- FDR:** first-degree relative
- SDR:** second-degree relative
- CTC:** computed tomographic colonography
- FAP:** familial adenomatous polyposis
- FIT:** fecal immunochemical test
- Hx:** history
- Screening colonoscopy** is performed on asymptomatic patients due for colorectal cancer screening because of age or familial risk indicators such as a family history of CRC or adenomatous polyps.
- Surveillance colonoscopy** is performed when a patient has an indicator condition or has had a personal malignancy or premalignancy that needs follow up and requires colonoscopy at more frequent intervals. Examples are Personal history of CRC (Z85.038) or Personal History of Colonic Adenomatous Polyps (Z86.010).
- Diagnostic colonoscopy** is performed when a patient has indicator condition requiring diagnostic workup that includes consideration of colon cancer as a potential diagnosis (i.e. persons with a history of rectal bleeding, anemia, or unexplained weight loss).
- An **"advanced adenoma"** is a lesion ≥ 1 cm in size or having high-grade dysplasia or villous elements.