



Lab A12-4 Cancer Screening

Use the table of recommended cancer screening tests to complete this lab. List the screening tests that are appropriate for you below, and then compare the recommended frequency with your actual frequency. If your actual frequency is less than the recommended frequency, consider taking appropriate action. If necessary, make an appointment to see your physician or devise a behavior change plan for incorporating regular self-exams for cancer into your routine; include strategies in your plan to help you remember to do your monthly self-exams and to keep yourself motivated. In addition to the tests listed in the table below, two additional monthly self-exams are often recommended: (1) testicular self-exam and (2) skin self-exam. If appropriate, add these to the chart of screening tests that are recommended for you.

Test or procedure	Recommended frequency	Actual frequency

Site	Recommendation
------	----------------

Breast	Yearly mammograms are recommended starting at age 40 and continuing for as long as a woman is in good health. Clinical breast exam should be part of a periodic health exam, about every three years for women in their 20s and 30s, and every year for women 40 and older. Women should know how their breasts normally feel and report any breast change promptly to their health care providers. Breast self-exam is an option for women starting in their 20s. Women at increased risk (e.g., family history, genetic tendency, past breast cancer) should talk with their doctors about the benefits and limitations of starting mammography screening earlier, having additional tests (i.e., breast ultrasound and MRI), or having more frequent exams.
---------------	--

Colon & Rectum	Beginning at age 50, men and women should follow one of the examination schedules below: <ul style="list-style-type: none"> • A fecal occult blood test (FOBT) every year • A flexible sigmoidoscopy (FSIG) every five years • Annual fecal occult blood test and flexible sigmoidoscopy every five years* • A double-contrast barium enema every five years • A colonoscopy every 10 years *Combined testing is preferred over either annual FOBT or FSIG every 5 years, alone. People who are at moderate or high risk for colorectal cancer should talk with a doctor about a different testing schedule.
---------------------------	---

Prostate	The PSA test and the digital rectal examination should be offered annually, beginning at age 50, to men who have a life expectancy of at least 10 years. Men at high risk (African American men and men with a strong family history of one or more first-degree relatives diagnosed with prostate cancer at an early age) should begin testing at age 45. For both men at average risk and high risk, information should be provided about what is known and what is uncertain about the benefits and limitations of early detection and treatment of prostate cancer, so that they can make an informed decision about testing.
-----------------	---

Uterus	<p>Cervix: Screening should begin approximately three years after a woman begins having vaginal intercourse, but no later than 21 years of age. Screening should be done every year with regular Pap tests or every two years using liquid-based tests. At or after age 30, women who have had three normal test results in a row may get screened every 2–3 years. However, doctors may suggest a woman get screened more often if she has certain risk factors, such a HIV infection or a weak immune system. Women 70 years and older who have had three or more consecutive normal Pap tests in the last 10 years may choose to stop cervical cancer screening. Screening after total hysterectomy (with removal of the cervix) is not necessary unless the surgery was done as a treatment for cervical cancer.</p> <p>Endometrium: The American Cancer Society recommends that all women should be informed about the risks and symptoms of endometrial cancer, and strongly encouraged to report any unexpected bleeding or spotting to their physicians. Annual screening for endometrial cancer with endometrial biopsy beginning at age 35 should be offered to women with or at risk for hereditary nonpolyposis colon cancer (HNPCC).</p>
---------------	---

Cancer-related checkup	For individuals undergoing periodic health examinations, a cancer-related checkup should include health counseling, and depending on a person's age, might include examinations for cancers of the thyroid, oral cavity, skin, lymph nodes, testes, and ovaries, as well as for some nonmalignant diseases.
-----------------------------------	---

Sources: American Cancer Society. 2004. *Cancer Facts and Figures*, 2004. Atlanta, Ga. American Cancer Society. Reprinted by permission of the American Cancer Society, Inc.

Fahey/Insel/Roth, *Fit and Well*, Sixth Edition. © 2005 The McGraw-Hill Companies.