Colorectal cancer:
A screening could save your life

As one of the top three leading causes of cancer-related deaths in the U.S., colorectal cancer is highly common. Fortunately, it’s also highly preventable. There are several tests that can help detect precancerous changes before symptoms even start.

If you’re 45 or older — or have a family history of colorectal cancer or other high-risk factors — talk to your doctor about scheduling a screening.

To help get you started, here’s a quick guide to common screenings:

**COLONOSCOPY**
Once sedated, your doctor will use a thin, flexible tube to view your colon for polyps and abnormal tissue.
*Recommended every 10 years.*

**FECAL OCCULT BLOOD TESTS (FOBT)**
A sample of your stool will be tested for the presence of blood.
*Recommended once a year.*

**FLEXIBLE SIGMOIDOSCOPY**
This screening is similar to a colonoscopy, but for the rectum.
Once sedated, your doctor will insert a tube to look for any abnormalities.
*Recommended every 5 years.*

**CT COLONOGRAPHY (VIRTUAL COLONOSCOPY)**
Your doctor will use X-rays and computer imaging to search for abnormal cells in your colon.
*Recommended every 5 years.*

**COLOGUARD® FIT DNA**
A large sample of your stool will be tested for DNA changes.
*Recommended every 3 years.*

Quick tip:
Start with a colonoscopy

While everyone’s plan is a little different, preventive colonoscopies are usually fully covered. However, if you opt for a different screening and have abnormal results, your doctor may order a diagnostic colonoscopy, which could come with out-of-pocket costs. That’s why it’s a good idea to start with a colonoscopy as your first screening.

If you’re not sure which screenings are covered by your plan, call Member Service at the number on the back of your member ID card.

Sources: CDC, USPSTF
Know your risk

Anyone can get colorectal cancer. While some risks are inherited, others are avoidable.

You may be at higher risk if you:

• Have large growths in the colon or rectum, Crohn’s disease, colitis, ovarian disease, or type 2 diabetes.
• Have a family history of colon, rectal, or other types of cancer.

You can reduce your risk by avoiding:

• Smoking cigarettes.
• Drinking three or more alcoholic drinks a day.
• Weight gain that results in having a BMI of 30 or greater.

Don’t forget to follow up

You may need follow-up tests if you have:

• Abnormal results on your screenings.
• Blood in your stool, a change in your bowel habits, or unexplained weight loss.

If cancer is diagnosed, you and your doctor will discuss a treatment plan based on the kind of cancer you have and if it has spread to other parts of the body.

SCHEDULE YOUR SCREENING TODAY

One quick phone call could protect your health for years to come. Call your doctor so you can set up a time to discuss your screening options.