



The Power to Change a Life

American Cancer Society Screening Guidelines



Breast	Women 40 and older should have an annual mammogram and an annual clinical breast examination (CBE) by a health care professional and continue to do so for as long as they are in good health. Ideally the CBE should occur before the scheduled mammogram. Women ages 20-39 should have a CBE every three years. Breast self-exam (BSE) is an option for women starting in their 20s. Women should be told about the benefits and limitations of BSE.
Colon and Rectum	Beginning at age 50, both men and women should follow one of these five testing schedules: <ul style="list-style-type: none"> • Yearly fecal occult blood test (FOBT) • Flexible sigmoidoscopy every five years (FSIG) • Yearly fecal occult blood test plus flexible sigmoidoscopy every five years* • Double-contrast barium enema every five years • Colonoscopy every 10 years <i>*Combined testing is preferred over either annual FOBT, or FSIG every five years, alone. People who are at moderate or high risk for colorectal cancer should talk with a doctor about a different testing schedule.</i>
Prostate	The Prostate-Specific Antigen (PSA) test and digital rectal examination (DRE) should be offered annually, beginning at age 50, to men who have at least a 10-year life expectancy. 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 to men 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 the regular Pap test or every two years using the newer liquid-based Pap test. Beginning at age 30, women who have had three normal test results in a row may get screened every two to three years. However, doctors may suggest that testing be done more often if a woman has certain conditions such as HIV or a weak immune system. Women 70 years of age or older who have had three or more normal Pap tests in a row and no abnormal Pap test results in the last 10 years may choose to stop having cervical cancer screening. Testing after a total hysterectomy is not necessary unless the surgery was done as a treatment for cervical cancer or precancer.</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.

For detailed guidelines or cancer information, call the American Cancer Society at 1.800.ACS.2345 or visit www.cancer.org.

American Cancer Society guidelines for early cancer detection are assessed annually in order to identify whether there is new scientific evidence sufficient to warrant re-evaluation of current recommendations. If evidence is sufficiently compelling to consider a change or clarification in a current guideline or the development of a new guideline, a formal procedure is initiated. Guidelines are formally evaluated every five years regardless of whether new evidence suggests a change in the existing recommendations.

American Cancer Society has created **C-Tools 2.0**, a timesaving PDA tool that will provide you with instant access to the most recent cancer information, and it's available free of charge to anyone in the health care field. Download it by going to www.acspdasupport.com.





Medicare Prevention Services



Medicare Part B Covered Services	Which of Your Patients is Eligible?
<p>Welcome to Medicare Visit The exam will include a thorough review of your health, education and counseling about the preventive services you need, like certain screenings and shots, and referrals for other care</p>	<p>If your Medicare Part B coverage begins on or after January 1, 2005, Medicare will cover a one-time preventive physical exam within the first six months that you have Part B.</p>
<p>COLORECTAL CANCER SCREENING: Fecal Occult Blood Test – Once every 12 months Flexible Sigmoidoscopy – Once every 48 months Colonoscopy – Once every 10 years but not within 48 months of a screening flexible Sigmoidoscopy. Once every 24 months if you are at risk for colon cancer. Barium Enema – Your doctor can use this instead of a flexible sigmoidoscopy or colonoscopy.</p>	<p>All people with Medicare age 50 or older except there is no minimum age for colonoscopy. Billing code: _____</p>
<p>MAMMOGRAPHY SCREENING:</p>	<p>Billing code: _____</p>
<p>CERVICAL CANCER SCREENING:</p>	<p>Billing code: _____</p>
<p>PROSTATE CANCER SCREENING:</p>	<p>Billing code: _____</p>
<p>Cardiovascular Screening: Medicare covers cardiovascular screenings that check your cholesterol and other blood fat (lipid) levels. High levels of cholesterol can increase your risk for heart disease and stroke.</p>	<p>Medicare will cover these tests every five years. Billing code: _____</p>
<p>Diabetes Screening: Medicare covers a screening blood sugar test to check for diabetes. You are considered at risk if you have any of the following: high blood pressure, history of abnormal cholesterol, obesity, or a history of high blood sugar.</p>	<p>If you are at risk for diabetes, you may be eligible for up to two screenings a year. Billing code: _____</p>
<p>Shots: Flu, Pneumococcal, Hepatitis B All adults 65 and older should get flu and pneumococcal shots. People with Medicare who are under 65 but have chronic illness should get a flu shot. People at medium to high risk for Hepatitis B should get Hepatitis B shots.</p>	<p>Flu is covered one a year in fall or winter. Pneumococcal and Hepatitis B are usually only need once in a lifetime. Billing code: _____</p>