

This is the home page.

Home - Gut-Check - Windows Internet Explorer
http://gutcheck.nci.nih.gov/

gut·check

Why should I care about colon cancer screening?

Watch this quick video intro to the website and find out.

Colon Cancer Screening Choices

View the: least invasive longest lasting most private

That Work

- + Home Stool Test
- + Flexible Sigmoidoscopy

That Don't Work

- × Waiting for Symptoms

That Are Being Studied

- ? Virtual Colonoscopy

Waiting for http://gutcheck.nci.nih.gov/... Internet | Protected Mode: On 10:18 AM 10/17/2011

This next set of screen shots are for the home stool test-you can get here by clicking “least invasive”, “most private” and Home Stool Test.

BACK TO HOME

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Colon Cancer Screening Choices

View the: [least invasive](#) [longest lasting](#) [most private](#)

That Work	That Don't Work
Home Stool Test	Waiting for Symptoms
Flexible Sigmoidoscopy	That Are Being Studied
Colonoscopy	Virtual Colonoscopy

[Compare the Choices That Work](#)

Home Stool Test Every Year

PRINT

 Screening Looks for tiny amounts of blood, which may be a sign of cancer	 Private Can be done privately at home, on your own time	 Hands-On Involves collecting a small sample of your stool	 First Step If detects blood, will need to follow up with colonoscopy	 Inexpensive Sometimes the kits are given away for free
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Hear the stories




Home Stool Test - Gut-Check#H7wMmqA5T-g#H7wMmqA5T-g#H7wMmqA5T-g - Windows Internet Explorer
http://gutcheck.nci.nih.gov/screenings/home-stool-test/index.html#H7wMmqA5T-g

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RNet Institute for Healthcare Im... Home Stool Test - Gut-... X

Get the facts

Annual stool testing works by finding colon cancer early, when it is most treatable. It looks for invisible blood in the stool (poop), which can be a sign of cancer. Since blood can also come from hemorrhoids or other causes, you'll need to follow up with a colonoscopy if you get a positive result. When repeated every year, the stool test is shown to save lives from colon cancer.

Getting the test kit:



Home stool test kits are generally handed out at the doctor's office or community

Pros

- No bowel prep
- Very quick
- Least invasive screening method
- Private
- Inexpensive

Cons

- May detect blood from something that is not cancer (a.k.a. "false positive")
- Like all screening methods, may miss some polyps and cancers
- Cannot remove or biopsy polyps
- Needs to be completed annually
- Possible diet and medication restrictions
- Involves handling stool

Possible Harms

There are no harms from the test itself

What can you do to get the best possible care?

- Keep to your recommended screening routine (don't overscreen or underscreen)
- Stick to any diet/medication restrictions
- Collect as many samples as your kit requires
- Try to collect your samples exactly as

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Home Stool Test - Gut-...

Home stool test kits are generally handed out at the doctor's office or community clinic. They're occasionally sent in the mail or available from drugstore clinics.

After you receive your kit, read the instructions carefully and call your doctor's office if you have questions. There are several types of kits. Depending on the one you use, you may have dietary and medication restrictions in the few days leading up to the collection of your sample. It's important to follow the directions because certain foods and medications can confuse the test results.

Collecting the sample:



The kit shown in this picture includes a small stick or wand for collecting a small sample of stool and a card where you place your sample. It's important to follow

- Try to collect your samples exactly as described in your kit
- Ask your family members about history of colon cancer or polyps

What to expect from the bill?

Home stool test kits are generally less than \$10 and are often free for patients.

How can I estimate my cost?

Your healthcare provider can give you a better idea of how much the annual test will cost.

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Returning the sample:

You'll need to wrap your sample(s) and deliver it/them to your doctor or lab -- either in person or by dropping it in the mail. Be sure and put your name on the kit so you don't have to do the test again. The sample kits aren't messy or smelly and the postal service is used to handling them.



Results:



Traces of blood in the stool are detected in the stool of about 1 in 20 people. An indication of blood doesn't necessarily mean you have cancer. It could be a false reading, bleeding hemorrhoids, or something else. If blood is detected, you'll need to have a colonoscopy to find out the cause and possibly treat it. If you do have cancer, finding it early is a good thing. Colon cancer is highly treatable when found early.

Follow-up:

It's important to do the test every year so you'll know as soon as any problems develop. It's important that everybody continue some sort of colon screening regularly between the ages of 50 and 75. Decide with your doctor or healthcare provider which screening plan works best for you and if you should continue screening past the age of 75.

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Home Stool Test - Gut-Check#H7wMmqA5T-g#H7wMmqA5T-g#H7wMmqA5T-g - Windows Internet Explorer

http://gutcheck.nci.nih.gov/screenings/home-stool-test/index.html#H7wMmqA5T-g

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Home Stool Test - Gut-... X

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Learn more from elsewhere on the web

- Everything Comes Down To Poo song**
Scrubs "My Musical" Episode
1/18/2007
Funny song about getting a stool sample from the television show Scrubs
- FOBT and FIT**
CancerQuest
8/25/2010
Learn more about the different kinds of home stool test kits
- Foods & Things to Avoid for Home Stool Test**
livestrong
2/22/2008
Some types of kits (FOBT) have dietary restrictions, but not all
- Home Screening Kit Animation**
Canadian Partnership Against Cancer
3/23/2010
Canada does home stool testing. Detailed how-to instructions start about a minute into this cartoon they made
- How to set up email reminders**
Digital Inspiration
11/10/2010
Need help remembering to do it every year?
- Find a Health Center**
Health Resources and Services Administration
2011
Federally-funded health centers provide care, even if you have no health insurance

U.S. Department of Health and Human Services

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This next set of screen shots are gotten to by clicking "longest lasting" or going to the colonoscopy tab.

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Colon Cancer Screening Choices View the: least invasive longest lasting most private

That Work	That Don't Work	That Are Being Studied
+ Home Stool Test	X Waiting for Symptoms	? Virtual Colonoscopy
+ Flexible Sigmoidoscopy		
+ Colonoscopy		

[Compare the Choices That Work](#)


Colonoscopy Every 10 Years

PRINT

 <p>Screening and Treatment Screening finds and removes pre-cancerous growths (polyps) before they become cancer</p>	 <p>Sedation You'll need time to recover and someone to drive you home</p>	 <p>Complete Bowel Prep Plan to be close to a toilet the night before the procedure</p>	 <p>Risks There's a small but real risk from the procedure and medication</p>	 <p>Cost Colonoscopy is the most expensive screening choice on a one-time basis</p>
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Hear the stories

Perfecto tells us how a sense of humor gets you through a colonoscopy.




Colonoscopy - Gut-Check#bL94KSsdetM#bL94KSsdetM#bL94KSsdetM#bL94KSsdetM#bL94KSsdetM - Windows Internet Explorer
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(polyps) before they become cancer home procedure medication on a one-time basis

Hear the stories

Perfecto tells us how a sense of humor gets you through a colonoscopy.



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Get the facts

The colonoscopy works by searching for polyps and signs of early cancer in your colon. Polyps are small growths that may eventually turn into cancer. Polyps can be removed during a colonoscopy. Cancer can be treated successfully if detected early. It takes a

Pros

- Removes polyps before they become cancer
- Longest time between screenings

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http://gutcheck.nci.nih.gov/screenings/colonoscopy/index.html#bL94KSsdetM

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Get the facts

The colonoscopy works by searching for polyps and signs of early cancer in your colon. Polyps are small growths that may eventually turn into cancer. Polyps can be removed during a colonoscopy. Cancer can be treated successfully if detected early. It takes a commitment of one to two full days to have a colonoscopy, which includes time for preparation and recovery. Specialists (often gastroenterologists) do this procedure regularly.

The Prep:



- Pros**
 - Removes polyps before they become cancer
 - Longest time between screenings
- Cons**
 - Takes 1–2 days
 - Unpleasant bowel preparation
 - Like all screening methods, can miss polyps and even cancers
 - Highest risk screening choice
 - Need a ride home
 - Expensive, and costs vary
- Possible Harms**
 - Risk of excessive bleeding in about 1 of 100 people who have polyps removed
 - Risk of bowel tear in about 1 of 1000 people
 - Possible reaction to the medication
- What can you do to get the best possible care?**
 - Keep to your recommended screening routine (don't overscreen or underscreen)
 - Follow all instructions for bowel prep
 - Select an experienced health care provider
 - Ask your family members about history of

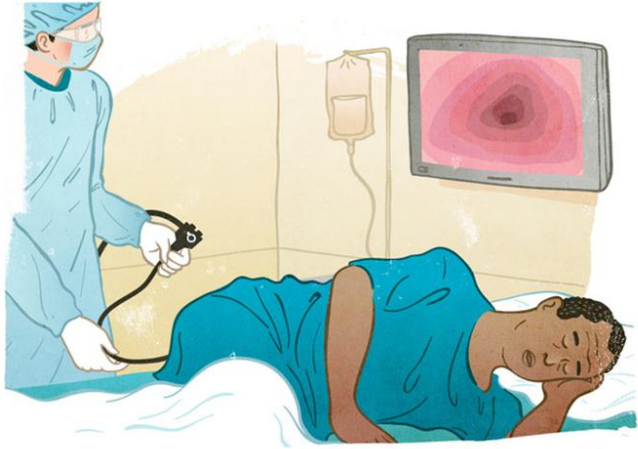
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The cleaner your colon is, the easier you'll make it for your doctor to find polyps. This means you'll need to completely empty your bowel before your colonoscopy. Most people are asked to drink a prescribed liquid substance the day before the procedure that causes frequent trips to the bathroom with diarrhea. Your doctor will give you specific instructions. You may need to adjust your other medications.

Because you will be sedated for the colonoscopy, you'll need to arrange for a ride home after the procedure.

The Procedure:



In the procedure room, the doctor and nurse will help you get comfortable as they connect you to an IV. Once you're relaxed from the medication, the doctor will

What to expect from the bill?
The average cost before insurance: \$1,500 - \$3,000

What affects the bill?

- If polyps are removed and/or biopsied
- What type of anesthesia is used
- Where you have the procedure


How can I estimate my cost?
Your out of pocket cost will depend on your insurance coverage, deductibles and co-pays. The person who will perform your colonoscopy can give you a better idea of how much it will cost.

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Colonoscopy - Gut-Check#bL94KSsdetM#bL94KSsdetM#bL94KSsdetM#bL94KSsdetM#bL94KSsdetM - Windows Internet Explorer
http://gutcheck.nci.nih.gov/screenings/colonoscopy/index.html#bL94KSsdetM

In the procedure room, the doctor and nurse will help you get comfortable as they connect you to an IV. Once you're relaxed from the medication, the doctor will insert a flexible tube through your anus and into your colon. Images of the inside of your colon will be viewable on a screen. If your doctor does find polyps (about 1 in 5 procedures), he or she can remove them immediately without you feeling anything. The colonoscopy takes about 20-40 minutes. You will be asleep or close to sleeping the entire time.

Recovery:




When you wake up, you'll feel a little bloated and will need to pass gas. Since your body will need time to recover from the sedation medication, you won't be able to drive or work, and probably shouldn't plan on making any major decisions the day of the procedure. Some people need a second recovery day.

It's normal to have a little bit of blood in your stool, especially if you had polyps removed. If bleeding does not stop, it's important for you to contact the doctor who performed your procedure.

Results:

Any sample tissues taken from your colon during the colonoscopy will be sent to a lab for testing. You should hear results within a week of your procedure, at which time make sure to discuss a follow-up plan with your



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Results:

Any sample tissues taken from your colon during the colonoscopy will be sent to a lab for testing. You should hear results within a week of your procedure, at which time make sure to discuss a follow-up plan with your gastroenterologist and your primary care doctor.



Follow-up:

It is recommended everybody screen regularly between the ages of 50 and 75. If no polyps are found during your colonoscopy and you have no other risk factors, you'll need another colonoscopy in 10 years. If polyps or other factors put you at higher risk, you may need one sooner. Screening more frequently than recommended may sound enticing, but it can expose you to unnecessary harms. Your doctor will help you decide what screening plan is right for you and if you should continue screening past the age of 75.

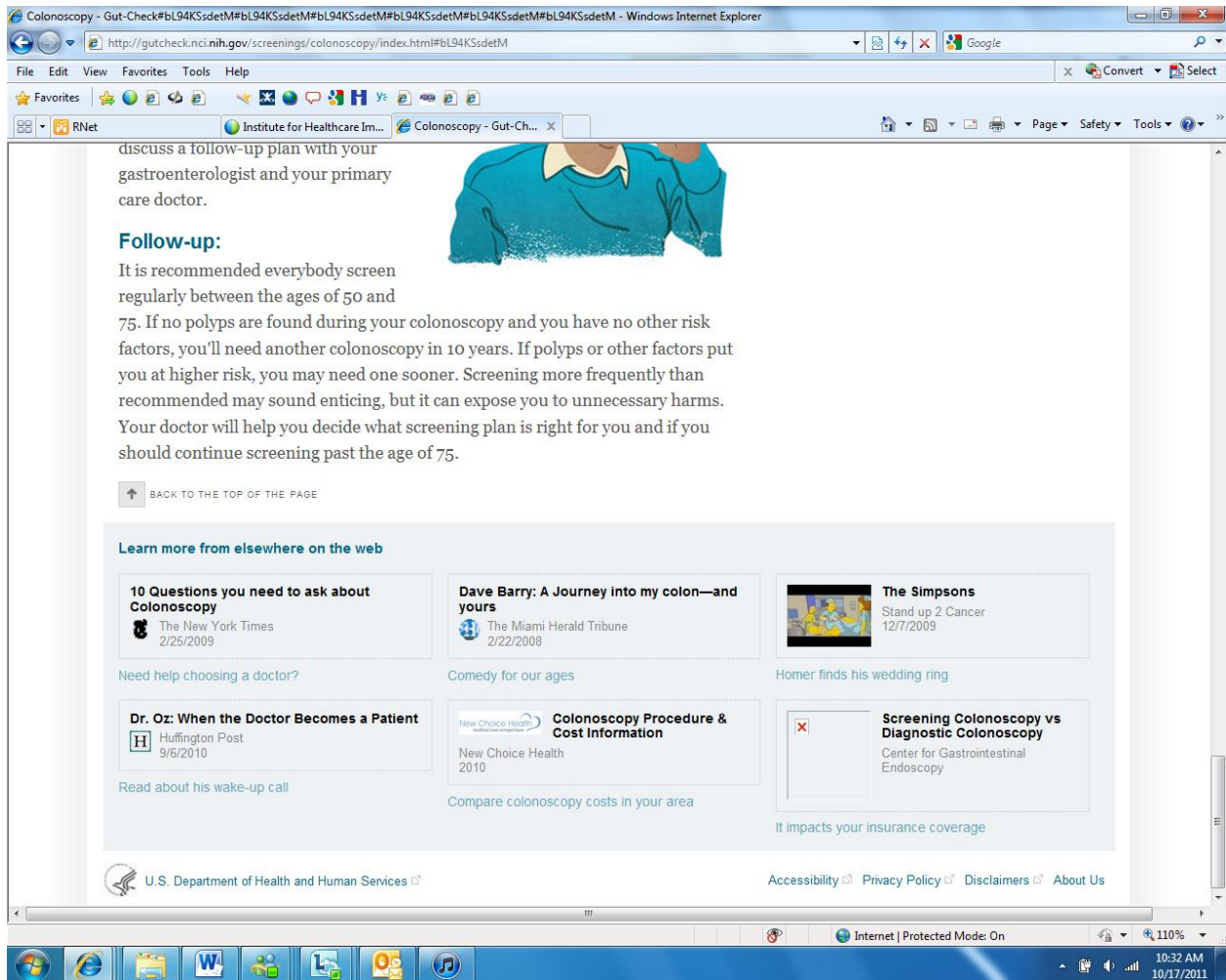
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Learn more from elsewhere on the web

10 Questions you need to ask about Colonoscopy The New York Times 2/25/2009 Need help choosing a doctor?	Dave Barry: A Journey into my colon—and yours The Miami Herald Tribune 2/22/2008 Comedy for our ages	The Simpsons Stand up 2 Cancer 12/7/2009 Homer finds his wedding ring
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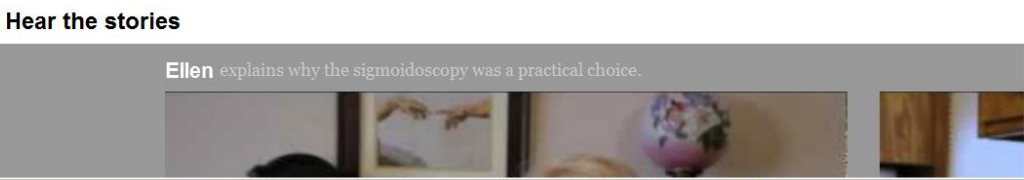
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That Work	That Don't Work	That Are Being Studied
+ Home Stool Test	X Waiting for Symptoms	? Virtual Colonoscopy
+ Flexible Sigmoidoscopy		
+ Colonoscopy		

[Compare the Choices That Work](#)

Flexible Sigmoidoscopy Every 5 Years (with a home stool test) PRINT

- **Screening**
Combining the two screening methods can find cancer in its earliest stage, when it is most treatable
- **No Sedation**
You'll be awake and can go back to work afterwards
- **Quick Bowel Prep**
Not as extensive as colonoscopy prep
- **Moderate Availability**
Not all doctors perform flexible sigmoidoscopies
- **Cost**
More affordable than a colonoscopy




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Hear the stories

Ellen explains why the sigmoidoscopy was a practical choice.



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Get the facts

The combination of a flexible sigmoidoscopy with a home stool test is an effective way to look for polyps and early cancer. Polyps are small growths that could become cancer one day. The flexible sigmoidoscopy only looks at part of the colon. It requires no sedation and a relatively simple prep. The procedure can be performed by some primary care doctors and gastroenterologists,

Pros

- Quick way to look for polyps and determine whether a colonoscopy is necessary
- Milder bowel prep than colonoscopy
- No specialists needed
- No sedation

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Flexible Sigmoidoscopy - Gut-Check#b6TBL-2y0T4#b6TBL-2y0T4#b6TBL-2y0T4 - Windows Internet Explorer
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Get the facts

The combination of a flexible sigmoidoscopy with a home stool test is an effective way to look for polyps and early cancer. Polyps are small growths that could become cancer one day. The flexible sigmoidoscopy only looks at part of the colon. It requires no sedation and a relatively simple prep. The procedure can be performed by some primary care doctors and gastroenterologists, but not all doctors perform the procedure regularly. For this reason, it can be hard to get a sigmoidoscopy in certain regions. You'll want to ask and make sure your doctor does them regularly.

Since the sigmoidoscopy only looks at part of the colon, a lot of people wonder if it's a good option. The sigmoidoscopy examines the lower portion of the colon, where many polyps and cancers are found. Combining a sigmoidoscopy with a regular stool test works by letting you know if there's a reason to have a colonoscopy or not.

The Prep:



Pros

- Quick way to look for polyps and determine whether a colonoscopy is necessary
- Milder bowel prep than colonoscopy
- No specialists needed
- No sedation
- No recovery time
- Few complications

Cons

- Involves two screening methods for full effectiveness
- Sigmoidoscopy is slightly uncomfortable (not painful)
- Like all screening methods, can miss polyps and even cancers
- Sigmoidoscopy not available everywhere
- Not able to remove all polyps

Possible Harms

- Risk of excessive bleeding in about 1 of 10,000 sigmoidoscopy procedures

What can you do to get the best possible care?


- Keep to your recommended screening routine (don't overscreen or underscreen)
- Follow all instructions for bowel prep
- Select a health care provider who does

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The Prep:



You'll need to clean part of your bowel so the doctor has a good chance of seeing polyps. Sigmoidoscopy prep typically includes giving yourself an enema on the evening or morning before the procedure. The doctor will give you specific instructions.

The Procedure:



- Sigmoidoscopy not available everywhere
- Not able to remove all polyps

Possible Harms

- Risk of excessive bleeding in about 1 of 10,000 sigmoidoscopy procedures

What can you do to get the best possible care?

- Keep to your recommended screening routine (don't overscreen or underscreen)
- Follow all instructions for bowel prep
- Select a health care provider who does sigmoidoscopies regularly
- Ask your family members about history of colon cancer or polyps

What to expect from the bill?

The average cost before insurance: \$500–\$750

What affects the bill?

- Where you have the procedure
- If polyps are removed and/or biopsied


How can I estimate my cost?

Your out of pocket cost will depend on your insurance coverage, deductibles and co-pays. The person who will perform your flexible sigmoidoscopy can give you a better idea of how much it will cost.

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instructions.

The Procedure:



In the exam room, you'll be with your doctor and a nurse. Once you are comfortable, the doctor will insert a flexible tube into your anus. You might feel pressure or some discomfort, but the procedure shouldn't be painful. If you do sense pain, tell your doctor so he/she can make adjustments. The doctor will view a screen and carefully look for any problems in your colon. Sedation is not generally needed, but it is available. The exam is over in about 20-30 minutes.

Leaving the office:

After the procedure is done, most

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Leaving the office:



After the procedure is done, most people feel mild cramping or bloating. This shouldn't last too long and will go away as you pass gas. You'll be able to get dressed, leave on your own, drive, and resume your normal diet and activities unless your doctor tells you otherwise.

It's possible you'll see a little bit of blood in your stool after a sigmoidoscopy. This should go away in a day or two. If the bleeding continues, contact your doctor.

Results:

If any tissue was taken during your sigmoidoscopy, it will be sent to a lab for testing. You should hear results within a week of your procedure, at which time you and your doctor will discuss any necessary follow-up. When done by an experienced doctor, a flexible sigmoidoscopy finds a problem in two-thirds of the people who have something to find. Combining it with home stool testing makes a more comprehensive screening plan. If either of these screening methods reveals a concern, you'll need to have a colonoscopy.



Follow up:


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Follow-up:

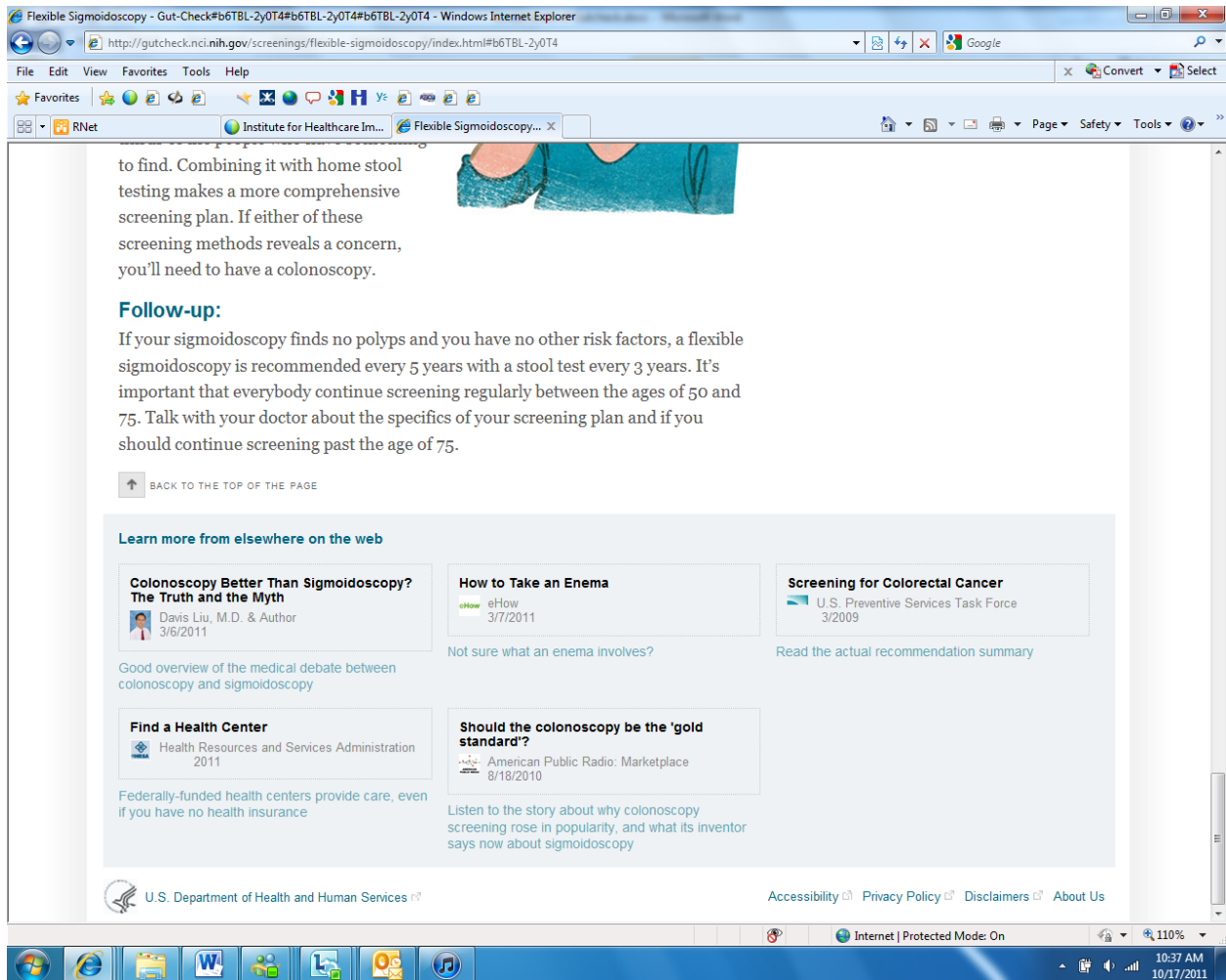
If your sigmoidoscopy finds no polyps and you have no other risk factors, a flexible sigmoidoscopy is recommended every 5 years with a stool test every 3 years. It's important that everybody continue screening regularly between the ages of 50 and 75. Talk with your doctor about the specifics of your screening plan and if you should continue screening past the age of 75.

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Learn more from elsewhere on the web

Colonoscopy Better Than Sigmoidoscopy? The Truth and the Myth Davis Liu, M.D. & Author 3/6/2011	How to Take an Enema eHow 3/7/2011	Screening for Colorectal Cancer U.S. Preventive Services Task Force 3/2009
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This next set of screen shots is accessed by clicking the link to "Compare the Choices that Work."

Compare the Choices That Work - Gut-Check - Windows Internet Explorer
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Colon Cancer Screening Choices

View the: least invasive longest lasting most private

That Work

- + Home Stool Test
- + Flexible Sigmoidoscopy
- + Colonoscopy

That Don't Work

- ✗ Waiting for Symptoms

That Are Being Studied

- ? Virtual Colonoscopy

Compare the Choices That Work

Compare the Choices That Work

Each of these methods has pros and cons. What's right for you depends on how you weigh the tradeoffs in terms of benefits, harms, and cost. Identifying your preference will help you decide with your provider what is the right screening plan for you.

How effective is it?

Home Stool Test	Flexible Sigmoidoscopy	Colonoscopy
Every year	Every 5 years with a Home Stool Test	Every 10 years

All three of these screening methods are effective

No studies have directly compared them, but all three of these methods are considered effective at reducing the likelihood of death from colon cancer. You can improve the quality of care you receive by having procedures performed by experienced providers, properly completing bowel prep, carefully following

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How effective is it?


Home Stool Test	Flexible Sigmoidoscopy	Colonoscopy
Every year	Every 5 years with a Home Stool Test	Every 10 years

All three of these screening methods are effective


No studies have directly compared them, but all three of these methods are considered effective at reducing the likelihood of death from colon cancer. You can improve the quality of care you receive by having procedures performed by experienced providers, properly completing bowel prep, carefully following stool test instructions, and sticking to a screening routine.

What is it like?


Home Stool Test	Flexible Sigmoidoscopy	Colonoscopy
Every year	Every 5 years with a Home Stool Test	Every 10 years



At home



At the doctor's office



In an endoscopy suite or at a hospital

How long does it take?

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Home Stool Test
Every year

10 minutes

- Short test

Flexible Sigmoidoscopy
Every 5 years with a Home Stool Test

1/2—1 day

- Quick prep
- 20-30 min procedure
- No recovery


Colonoscopy
Every 10 years

1—2 days

- Night of prep
- 20-40 min procedure
- 1-2 days of recovery

How long does it take?


Home Stool Test
Every year



Screening

- Looks for invisible blood, which may be a sign of cancer
- Needs follow-up with colonoscopy if anything is found


Flexible Sigmoidoscopy
Every 5 years with a Home Stool Test



Screening

- Looks for polyps and signs of early cancer
- Needs follow-up with colonoscopy if anything is found

Colonoscopy
Every 10 years



Screening & Treatment

- Finds and removes polyps before they become cancer

How does it work?

Home Stool Test
Every year

Flexible Sigmoidoscopy
Every 5 years with a Home Stool Test

Colonoscopy
Every 10 years

How often does it need to be done?

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How often does it need to be done?

Home Stool Test Every year	Flexible Sigmoidoscopy Every 5 years with a Home Stool Test	Colonoscopy Every 10 years
<p>Every year</p> <ul style="list-style-type: none"> Follow-up with a colonoscopy if blood is found 	<p>Every 5 years</p> <ul style="list-style-type: none"> Follow-up with colonoscopy if polyps or blood are found Home stool test is recommended every 3 years Screening more than the recommendation unnecessarily exposes you to potential harms 	<p>Every 10 years</p> <ul style="list-style-type: none"> More frequently if polyps are found or if you have increased risk factors Screening more than the recommendation unnecessarily exposes you to potential harms

What are the risks?

Home Stool Test Every year	Flexible Sigmoidoscopy Every 5 years with a Home Stool Test	Colonoscopy Every 10 years
<p></p> <p>No Risk</p> <ul style="list-style-type: none"> There are no possible harms from the test itself 	<p></p> <p>Smaller Risk</p> <ul style="list-style-type: none"> Risk of excessive bleeding in about 1 of 10,000 sigmoidoscopy procedures 	<p></p> <p>Small Risk</p> <ul style="list-style-type: none"> Risk of excessive bleeding in about 1 of 100 people who have polyps removed Risk of bowel tear in about 1 of 1000 people Possible reaction to the medication

Does it hurt?




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 http://gutcheck.nci.nih.gov/screenings/index.html




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Does it hurt?

Home Stool Test Every year	Flexible Sigmoidoscopy Every 5 years with a Home Stool Test	Colonoscopy Every 10 years
		
No Discomfort	Not sedated	Sedated
<ul style="list-style-type: none"> No pain or discomfort, although you will be required to collect a few small stool samples 	<ul style="list-style-type: none"> Slight pressure or discomfort during the procedure, but should not be painful Generally no medication given Gas and cramps are common afterwards Easy recovery 	<ul style="list-style-type: none"> Medication given during the procedure helps you relax Gas and cramps are common afterwards Recovery experience and length can vary

What affects the cost?

Home Stool Test Every year	Flexible Sigmoidoscopy Every 5 years with a Home Stool Test	Colonoscopy Every 10 years
		
Free—\$10	\$100—\$300	\$1,500—\$3,000
<ul style="list-style-type: none"> The type of kit 	<ul style="list-style-type: none"> If polyps are removed and/or biopsied Where you have the procedure 	<ul style="list-style-type: none"> If polyps are removed and/or biopsied What type of anesthesia is used Where you have the procedure

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Compare the Choices That Work - Gut-Check

Gas and cramps are common after wards
 recovery experience and length can vary
 Easy recovery

What affects the cost?

Home Stool Test	Flexible Sigmoidoscopy	Colonoscopy
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How easy is it to arrange?

Home Stool Test	Flexible Sigmoidoscopy	Colonoscopy
Every year	Every 5 years with a Home Stool Test	Every 10 years
Easy	Moderate	Moderate
<ul style="list-style-type: none"> Commonly available from healthcare providers You may need to ask for the kit 	<ul style="list-style-type: none"> May be hard to find a doctor who performs them regularly Requires an appointment 	<ul style="list-style-type: none"> Requires a referral to a specialist May be hard to find a specialist nearby Requires an appointment

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This next set of screen shots are accessed by clicking the link **Waiting for Symptoms**.

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Colon Cancer Screening Choices

View the: [least invasive](#) [longest lasting](#) [most private](#)

That Work

- + Home Stool Test
- + Flexible Sigmoidoscopy
- + Colonoscopy

That Don't Work

✗ Waiting for Symptoms

That Are Being Studied

? Virtual Colonoscopy

[Compare the Choices That Work](#)

Waiting for Symptoms

PRINT



Examines Nothing



No Effort

Easy to fit into a busy schedule



False Sense of Security

No symptoms doesn't mean there's no problem



High Risk

Treatable cancers are missed. Cancer may no longer be treatable when it shows symptoms.

Hear the stories

Joel talks about what happens if you get colon cancer.




Waiting for Symptoms - Gut-Check#OEdML40QzIl - Windows Internet Explorer
http://gutcheck.nci.nih.gov/screenings/waiting-for-symptoms/index.html#OEdML40QzIl

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Hear the stories

Joel talks about what happens if you get colon cancer.



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Get the facts

Your doctor may talk to you about “watchful waiting” as an approach for other medical situations. Unfortunately, this isn’t an option when it comes to colorectal cancer. Many people with colon cancer don’t experience symptoms until it’s too late. The recommended screening methods can find cancer or pre-cancerous polyps early, when they can be treated and removed. That’s why having a screening plan is important.

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Get the facts

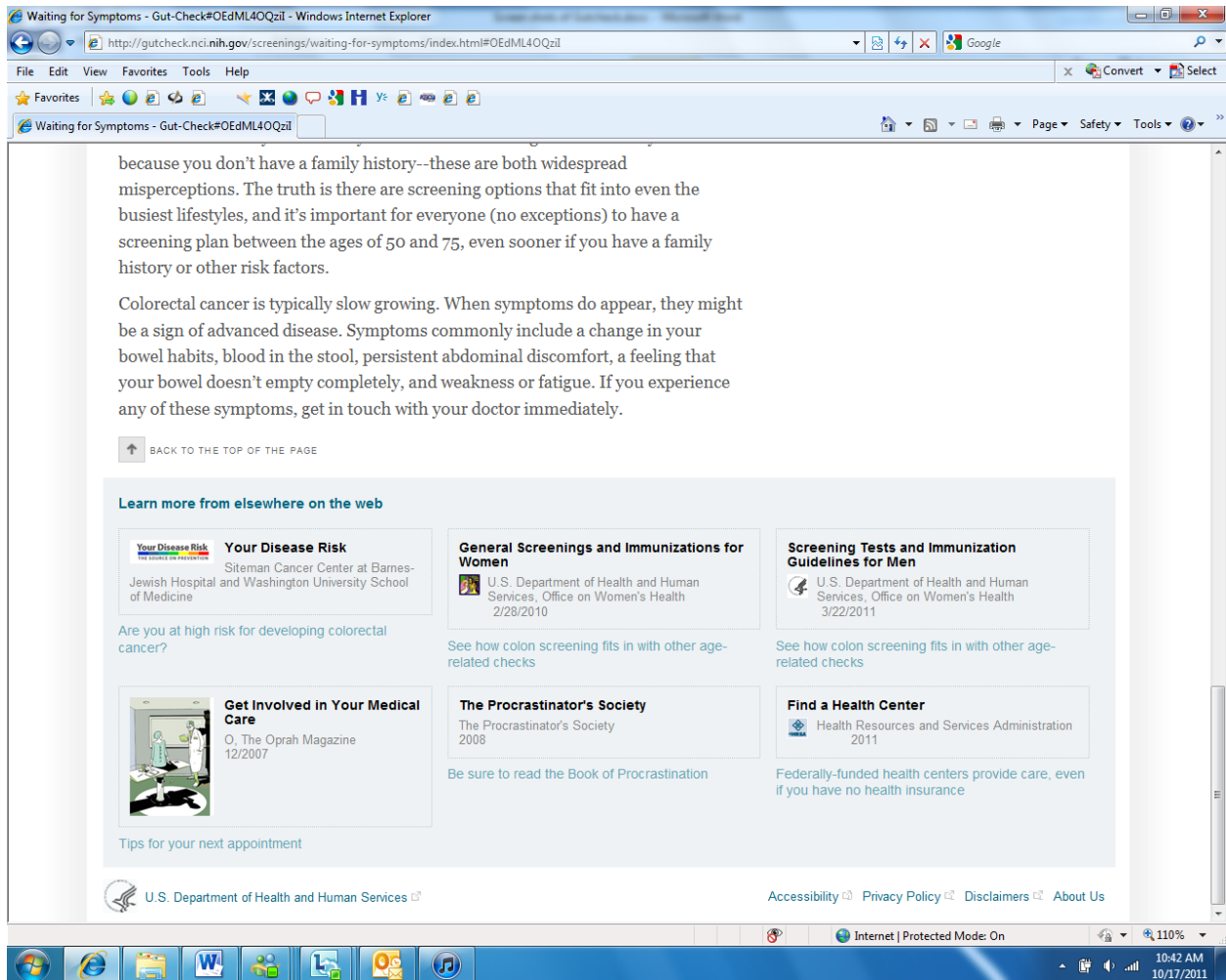
Your doctor may talk to you about “watchful waiting” as an approach for other medical situations. Unfortunately, this isn’t an option when it comes to colorectal cancer. Many people with colon cancer don’t experience symptoms until it’s too late. The recommended screening methods can find cancer or pre-cancerous polyps early, when they can be treated and removed. That’s why having a screening plan is important.



The illustration depicts a man in a blue suit, appearing overwhelmed and busy. He is talking on a red mobile phone, holding a red shopping bag with a 'groceries' tag, and carrying a bouquet of red flowers. A large red alarm clock is shown ringing in front of him. A thought bubble above his head shows an elderly woman with glasses. A small box labeled 'Busy Person' is positioned near the shopping bag.

You’re not alone if you feel like you don’t have time to get screened or you’re fine because you don’t have a family history--these are both widespread misperceptions. The truth is there are screening options that fit into even the

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This next set of screen shots are accessed by clicking the link That are Being Studied.

Virtual Colonoscopy - Gut-Check - Windows Internet Explorer

http://gutcheck.nci.nih.gov/screenings/virtual-colonoscopy/index.html

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Virtual Colonoscopy - Gut-Check

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Colon Cancer Screening Choices View the: [least invasive](#) [longest lasting](#) [most private](#)

<p>That Work</p> <ul style="list-style-type: none"> <li style="background-color: #0070c0; color: white; padding: 5px; margin-bottom: 5px;">Home Stool Test <li style="background-color: #0070c0; color: white; padding: 5px; margin-bottom: 5px;">Flexible Sigmoidoscopy <li style="background-color: #0070c0; color: white; padding: 5px;">Colonoscopy 	<p>That Don't Work</p> <ul style="list-style-type: none"> <li style="background-color: #0070c0; color: white; padding: 5px; margin-bottom: 5px;">Waiting for Symptoms <p>That Are Being Studied</p> <ul style="list-style-type: none"> <li style="background-color: #ffcc00; color: white; padding: 5px; margin-bottom: 5px;">Virtual Colonoscopy
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[Colonoscopy](#)

[Compare the Choices That Work](#)

Virtual Colonoscopy PRINT



Screening
CT scan takes images of the colon and surrounding areas



Requires Bowel Prep
Like the colonoscopy, you'll need to plan time for prep



Inconclusive Research
Unclear if the benefits outweigh the downsides



Availability
Somewhat available, but rarely covered by insurance



Expensive
But less than a regular colonoscopy

Get the facts

Virtual colonoscopy, also called CT colography, is a relatively new test that's not generally covered by insurance. The test creates images of the inside of the colon by taking a CT scan from outside of the body. It is a screening only, so if it shows any polyps (pre-cancerous growths), it needs to be followed up with a colonoscopy to remove them. At this time, it's unclear whether or not the benefits

Pros

- Less invasive way to look for polyps
- Relatively quick
- Few complications
- No sedation
- May unexpectedly reveal treatable

Waiting for http://gutcheck.nci.nih.gov/screenings/virtual-colonoscopy/index.html...

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Virtual Colonoscopy - Gut-Check - Windows Internet Explorer
http://gutcheck.nci.nih.gov/screenings/virtual-colonoscopy/index.html


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Virtual Colonoscopy - Gut-Check

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The Prep:



- Pros**
 - Less invasive way to look for polyps
 - Relatively quick
 - Few complications
 - No sedation
 - May unexpectedly reveal treatable problems outside of the colon
- Cons**
 - Moderate to full bowel prep
 - Dietary restrictions
 - Slight discomfort when air is put into bowel
 - Like all screening methods, does not detect all polyps or cancers
 - Cannot remove or biopsy polyps
 - May reveal abnormalities outside of the colon that cause unnecessary testing and concern
 - Poor insurance coverage
 - Expensive
 - Radiation Exposure
- Possible Harms**
 - Small risk of damage from air pumped into colon
 - Radiation exposure may slightly increase risk of cancer

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Virtual Colonoscopy - Gut-Check - Windows Internet Explorer

http://gutcheck.nci.nih.gov/screenings/virtual-colonoscopy/index.html

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Virtual Colonoscopy - Gut-Check


The Procedure:



The test is conducted in a room with a CT scanner in a medical facility. When you are ready, a small amount of air is inserted into your bowel. This might be slightly uncomfortable. You will lie still on a bed for about 10 minutes as the scanner moves over your body taking x-rays. The entire procedure takes 30-60 minutes. Sedation is not used.

Afterwards:

When the imaging is finished, you may dress on your own, drive home, and



- Follow all instructions for bowel prep
- Follow dietary restrictions
- Find an experienced screening facility
- Ask your family members about history of colon cancer or polyps

What to expect from the bill?

The average cost before insurance: \$400-\$800

What affects the bill?

- Where you have the procedure

How can I estimate my cost?

Your out of pocket cost will depend on your insurance coverage, deductibles and co-pays. The facility that will conduct your virtual colonoscopy can give you a better idea of how much it will cost.

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Afterwards:

When the imaging is finished, you may dress on your own, drive home, and resume your normal diet and activities (unless your physician tells you otherwise). The x-rays will be constructed into 3D images of your colon. A specialist will scan the images for polyps.



Results:



You should hear results within a week or two of your procedure, at which point you should discuss a follow-up plan with your primary doctor. If a virtual colonoscopy detects an abnormal growth, you will need to have a colonoscopy to remove it. Abnormal growths are detected in about 1 out of 5 people. It's possible the CT scan will reveal something outside of the colon which could require additional testing. While sometimes these findings save lives, they can also cause unnecessary worry.

Follow-up:

Everyone should continue colon screening regularly between the ages of 50 and 75. The timing has not been studied closely, but some doctors suggest that a virtual colonoscopy be repeated every 5 years if no polyps are found and you have

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Follow-up:

Everyone should continue colon screening regularly between the ages of 50 and 75. The timing has not been studied closely, but some doctors suggest that a virtual colonoscopy be repeated every 5 years if no polyps are found and you have no other risk factors. Talk to your doctor about the specifics of your screening plan past the age of 75.

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