

# Cancer Detection Guidelines

Increase your chances of early diagnosis by scheduling regular exams with your doctor.

AGE	FREQUENCY	FEMALES	MALES
18-20	One Time	Complete health exam <sup>1</sup>	Complete health exam <sup>1</sup>
	Yearly		
	Monthly	Skin self-exam	Skin self-exam, testes self-exam
21-39	Every 3 Years	Complete health exam <sup>1</sup> , clinical breast exam, Pap test <sup>2</sup>	Complete health exam <sup>1</sup>
	Yearly	Endometrial biopsy <sup>3</sup>	
	Monthly	Skin self-exam, breast self-exam	Skin self-exam, testes self-exam
40-49	Every 5-10 Years	Colonoscopy, CT Colonography, flexible sigmoidoscopy, double contrast barium enema (DCBE) <sup>5</sup>	Colonoscopy, CT Colonography, flexible sigmoidoscopy, double contrast barium enema (DCBE) <sup>5</sup>
	Every 3 Years	Complete health exam <sup>1</sup> , Pap test <sup>2</sup> , Multi-targeted stool DNA test (MT-sDNA) <sup>5</sup>	Complete health exam <sup>1</sup> , prostate-specific antigen (PSA) blood test <sup>4</sup> , Multi-targeted stool DNA test (MT-sDNA) <sup>5</sup>
	Yearly	Clinical breast exam, mammogram, digital rectal exam, endometrial biopsy <sup>3</sup> , fecal occult blood test (FOBT) or fecal immunochemical test (FIT) <sup>5</sup>	Digital rectal exam, fecal occult blood test (FOBT) or fecal immunochemical test (FIT) <sup>5</sup>
	Monthly	Skin self-exam, breast self-exam	Skin self-exam, testes self-exam
50-65	Every 5-10 Years	Colonoscopy, CT Colonography, flexible sigmoidoscopy, double contrast barium enema (DCBE) <sup>5</sup> , HPV and Pap co test <sup>2</sup>	Colonoscopy, CT Colonography, flexible sigmoidoscopy, double contrast barium enema (DCBE) <sup>5</sup>
	Every 3 Years	Pap test <sup>2</sup> , Multi-targeted stool DNA test (MT-sDNA) <sup>5</sup>	Multi-targeted stool DNA test (MT-sDNA) <sup>5</sup>
	Yearly	Complete health exam <sup>1</sup> , clinical breast exam, mammogram, endometrial biopsy <sup>3</sup> , digital rectal exam, fecal occult blood test (FOBT) or fecal immunochemical test (FIT) <sup>5</sup> , low dose helical CT (LDCT) <sup>6</sup>	Complete health exam <sup>1</sup> , prostate-specific antigen (PSA) blood test <sup>4</sup> , digital rectal exam, fecal occult blood test (FOBT) or fecal immunochemical test (FIT) <sup>5</sup> , low dose helical CT (LDCT) <sup>6</sup>
	Monthly	Skin self-exam, breast self-exam	Skin self-exam, testes self-exam
66+	Every 5-10 Years	Colonoscopy, CT Colonography, flexible sigmoidoscopy, double contrast barium enema (DCBE) <sup>5</sup>	Colonoscopy, CT Colonography, flexible sigmoidoscopy, double contrast barium enema (DCBE) <sup>5</sup>
	Every 3 Years	Multi-targeted stool DNA test (MT-sDNA) <sup>5</sup>	Multi-targeted stool DNA test (MT-sDNA) <sup>5</sup>
	Yearly	Complete health exam <sup>1</sup> , clinical breast exam, mammogram, endometrial biopsy <sup>3</sup> , digital rectal exam, fecal occult blood test (FOBT) or fecal immunochemical test (FIT) <sup>5</sup> , low dose helical CT (LDCT) <sup>6</sup>	Complete health exam <sup>1</sup> , prostate-specific antigen (PSA) blood test <sup>4</sup> , digital rectal exam, fecal occult blood test (FOBT) or fecal immunochemical test (FIT) <sup>5</sup> , low dose helical CT (LDCT) <sup>6</sup>
	Monthly	Skin self-exam, breast self-exam	Skin self-exam, testes self-exam



Research for a Cure

National Headquarters Address:  
5515 Security Lane, Suite 1105  
Rockville, MD 20852  
1-800-321-CURE (2873)  
[www.NFCR.org](http://www.NFCR.org)

- At minimum, includes medical/lifestyle history and physical exam. Blood/urine tests and chest x-ray may also be included, at physician's discretion.
- Women 21-29 should have a Pap test every 3 years, even if vaccinated for HPV. Women 30-65 should have HPV and Pap co-testing every 5 years or Pap test alone every 3 years. Women ages 66+ should stop cervical cancer screening if they have had ≥3 consecutive negative Pap tests or ≥2 consecutive negative HPV and Pap tests within the past 10 years, with the most recent test occurring in the past 5 years; or have had a total hysterectomy.
- Beginning at age 35, for women at high risk for endometrial cancer only. This especially includes women with genetic mutations associated with hereditary nonpolyposis colon cancer (HNPCC). Women with HNPCC who have finished having children may choose to have a hysterectomy.
- Research has not yet proven whether the benefits of prostate cancer screening outweigh the harms of testing and treatment. All men should talk with their doctor to decide if testing is right for them, beginning at age 50 for men at average risk, age 45 for African American men and high risk men, and age 40 for those with family history at a young age.
- Beginning at age 45, men and women should take one of the following examinations: Colonoscopy (every 10 years), Double-contrast barium enema (every 5 years), CT Colonography (every 5 years), MT-sDNA (every 3 years), or FOBT or FIT, with at least 50% test sensitivity for cancer (yearly). Screening with the MT-sDNA, FOBT and FIT is done at home. Screening should continue to age 75. Your doctor may suggest screening up to age 85.
- Lung cancer screening should only be considered for persons who meet all of the following criteria: Aged 55-74, in fairly good health, have a 30 pack-year smoking history, and either still smoke or quit within the past 15 years. Screening should only be done at facilities that have experience in LDCT for lung cancer screening. Discuss risks and benefits with your physician to decide if screening is right for you.

Note: Your doctor may suggest a different testing schedule depending on your risk of developing a specific type of cancer. Discuss with your doctor to develop a screening schedule that is tailored to your own situation.