MANAGE PATIENT BASED ON RISK LEVEL AND CLINICAL SIGNS AND SYMPTOMS

Management of patients with increased risk can include a range of tests, services, and clinical actions. Generally speaking, individuals at increased risk of CRC should undergo earlier and/or more frequent CRC screening and individuals at high risk should be referred for genetic counseling and possible genetic testing and may be candidates for high-risk cancer screening, surveillance, and prevention practices. In the following sections, you will read more about cancer screening, surveillance, and prevention practices for individuals at different risk levels.

Patient communication is also a key element of effective management. In addition to communicating about CRC risk and prevention in a patient-friendly way, the patient should have a clear understanding of the management plan outlined by his or her clinician. A clinician’s recommendation is the main factor influencing whether or not a patient undergoes CRC screening.

The management activities discussed in this toolkit are for the most part focused on mitigating risk for a future cancer. However, the section on evaluating symptomatic patients for CRC has an additional context: the presenting patient may actually have cancer at the time of the clinical encounter. When the presenting patient exhibits alarm signs or symptoms of a possible cancer, clinicians should follow guidelines about evaluation and diagnosis of cancer, regardless of the patient’s age and other risk factors. Screening guidelines that identify when and how at-risk individuals should undergo screening do not apply to the symptomatic individual.