Because you are over 50, Dr. ___________________ wants you to have a colonoscopy to help prevent colon cancer.

What is colon cancer?

- Cancer can develop in your colon (large intestine). This is called colon cancer.
- Usually, colon cancer begins as a polyp. A polyp is a small, grape-like growth on the inside of the colon. Polyps are not cancer, but they can turn into cancer.
- It is possible to find and remove polyps before cancer develops.
- Looking for polyps and removing them can save your life!

How common is colon cancer?

Colon cancer is very common:

- 1 in 20 adults will develop colon cancer.
- Women develop colon cancer as often as men.
- More than 50,000 people die each year in the U.S. from this cancer.
- Everyone is at risk for developing polyps and colon cancer. The older you are, the greater your risk.

Facts you should know about testing for colon cancer:

- Experts say that age 50 is the best time to begin doing tests to prevent this cancer.
- You should have a test even if you don’t have any symptoms. Polyps rarely cause symptoms – they grow silently, without pain, bleeding, or changing the way you go to the bathroom.
- You should have a test even if no one in your family has had colon cancer. Most colon cancer happens to people who do not have a family history.

Everyone over age 50 should have a test to prevent colon cancer!
What is colonoscopy?

Colonoscopy is the most popular test to prevent colon cancer. An experienced doctor puts a very thin, flexible tube (a colonoscope) into the anus in order to look at the inside of your colon. The doctor looks for polyps or cancer. If polyps are found, the doctor removes these during the exam. This will prevent colon cancer.

The day before your colonoscopy, you will drink a liquid to clean out your colon. This will let the doctor get a clear look inside your colon. You will go to the bathroom many times, including during the night.

You will be given a medicine right before the colonoscopy to help you feel relaxed and comfortable. The exam takes about half an hour, and you should plan to miss a day of work. You will need someone to drive you home after the exam.

With colonoscopy, there is a very small risk of bleeding or poking a hole in the colon. This would require surgery to fix. This happens only about 1 in 2500 times.

Colonoscopy is not as difficult as some people think. Many like the “peace of mind” it gives them. If everything is normal, you don’t need another test for 10 years!

Are there tests other than colonoscopy?

There are other tests you could have. These include tests to find tiny amounts of blood in your stool (stool cards), flexible sigmoidoscopy (like colonoscopy, but the doctor only looks at half of the colon), and barium enema (x-rays). Any of these tests is a good option, but they can miss polyps and, if something abnormal is found, a colonoscopy will be needed to see what the problem is. Also, unlike colonoscopy, they need to be done every year or every few years. If you have any questions about these other tests, please speak with your primary care doctor.

How much does colonoscopy cost?

Most insurance plans, including Medicare, pay for colonoscopy. There may be a small fee (co-pay) that you must pay. Call your insurance provider or the scheduler (below) if you have questions about this.

Your doctor has spoken with you about having a colonoscopy.

Please call as soon as possible to schedule the exam at (720) 848-2777.

The scheduler will give you more instructions about getting ready for the exam.

If you have any more questions or concerns, please call your primary care doctor:
University Medicine - Garfield clinic: (303) 372-3000 / Fitzsimons (AOP) clinic: (720) 848-2300