

American Cancer Society's Early Detection Guidelines for Women

Get Your Tests! to Find Cancer Early

Age 20 to 29:

- At the time of a checkup, examination for cancer of the thyroid, oral cavity, skin, lymph nodes, and ovaries
- Women should be told about the benefits and limitations of BSE. Breast changes should be reported to the physician or nurse without delay. BSE is an option.

Every three years:

- Clinical breast exam

ONE of the following (Cervical):^{+, ++}

- Yearly conventional Pap test **OR**
- Every other year liquid-based Pap test

Age 30 to 39:[^]

- At the time of a checkup, examination for cancer of the thyroid, oral cavity, skin, lymph nodes, and ovaries
- Women should be told about the benefits and limitations of BSE. Breast changes should be reported to the physician or nurse without delay. BSE is an option.

Every three years:

- Clinical breast exam

ONE of the following (Cervical):

If Pap testing history has been normal^{^^, ++}

- Conventional or liquid-based Pap test every 2 to 3 years **OR**
- Pap test with HPV DNA test every 3 years

Age 40 to 49:

- At the time of a checkup, examination for cancer of the thyroid, oral cavity, skin, lymph nodes, and ovaries
- Breast changes should be reported to the physician without delay. BSE is an option.

Every year:^{^, +++}

- Mammogram; continue as long as the woman is in good health
- Clinical breast exam prior to mammogram

ONE of the following (Cervical):

If Pap testing history has been normal^{^^, ++}

- Conventional or liquid-based Pap test every 2 to 3 years **OR**
- Pap test with HPV DNA test every 3 years

At menopause (Endometrial)

- Women should be informed about risks and symptoms of endometrial cancer and strongly encouraged to report any unexpected bleeding or spotting to their doctor.

Age 50 and older:

- At the time of the checkup, examination for cancer of the thyroid, oral cavity, skin, lymph nodes, and ovaries

Every year:[^]

- Mammogram; continue as long as the woman is in good health
- Clinical breast exam

ONE of the following (Cervical):

If Pap testing history has been normal^{^^, ++}

- Conventional or liquid-based Pap test every two to three years **OR**
- Pap test with HPV DNA test every three years

ONE of the following (Colon):

Tests That Find Polyps and Cancer

- Flexible sigmoidoscopy every 5 years*, **OR**
- Colonoscopy every 10 years, **OR**
- Double-contrast barium enema every 5 years*, **OR**
- CT colonography (virtual colonoscopy) every 5 years*

Tests That Primarily Find Cancer

- Yearly fecal occult blood test (gFOBT)***, **OR**
- Yearly fecal immunochemical test (FIT)***, **OR**
- Stool DNA test (sDNA), interval uncertain***

**If the test is positive, a colonoscopy should be done.*

***The multiple stool take-home test should be used. One test done by the doctor is not adequate for testing. A colonoscopy should be done if the test is positive.*

The tests that are designed to find both early cancer and polyps are preferred if these tests are available and the patient is willing to have one of these more invasive tests.



NOTES:

Health counseling for tobacco use, sunscreen exposure, physical activity and nutrition, sexual practices, risk factors and environmental and occupational exposures should also be part of every checkup.

Women should begin testing for colorectal cancer earlier and/or undergo testing more frequently if at increased or high risk for this cancer.

[^] For women 35 and older, if at high risk for hereditary nonpolyposis colon cancer (HNPCC), yearly testing should be offered for endometrial cancer with endometrial biopsy.

⁺ Start about three years after beginning vaginal intercourse, but no later than 21 years of age.

^{^^} Cervical cancer testing should be done every year with a regular Pap test or every two years with the liquid Pap test if a woman hasn't had three normal Pap tests in a row; women 70 years of age and older who have had no abnormal Pap test in the past 10 years may choose to stop testing.

⁺⁺ Women who have had a total hysterectomy (removal of the uterus and cervix) may choose to stop Pap testing unless surgery was for a cervical cancer or precancer.

⁺⁺⁺ Women at high risk for breast cancer should have an MRI with their mammogram.