Helpful Colonoscopy FAQs:

Some of this information was developed by the American College of Gastroenterologists – ACG. For more information, please visit www.gi.org. This information is intended to provide general guidance. It does not provide definitive medical advice. It is important that you consult your physician about a specific condition or symptoms.

What is a colonoscopy?

Colonoscopy is a procedure which enables a physician (usually a gastroenterologist) to directly image and examine the entire colon. It is effective in the diagnosis and/or evaluation of various GI disorders (e.g. colon polyps, colon cancer, diverticulosis, inflammatory bowel disease, bleeding, change in bowel habits, abdominal pain, obstruction and abnormal x-rays or CT scans) as well as in providing therapy (for example, removal of polyps or control of bleeding). It is also used for screening for colon cancer. A key advantage of this technique is that it allows both imaging of abnormal findings and also therapy or removal of these lesions during the same examination. This procedure is particularly helpful for identification and removal of precancerous polyps.

When should I have a colonoscopy?

If you have no colorectal symptoms, family history of colon cancer, polyps or inflammatory bowel disease you should have your first exam at age 50 whether you are a man or a woman since colon cancer affects both EQUALLY! Recent evidence suggests that African Americans should begin screening earlier at the age of 45.

If one or more first degree relative (parent, sibling or child) has had a precancerous polyp or colon cancer, the general guideline is to begin colon cancer screening 10 years younger than the youngest age of the family member with colon cancer, or age 40, whichever is younger. There are additional guidelines for suspected or confirmed rare syndromes, and you should discuss these options with your doctor.

For patients with ulcerative colitis involving the entire colon and patients with Crohn's disease, screening for colon cancer should begin 8 – 10 years after the initial diagnosis is made.

What is a screening colonoscopy verses a diagnostic colonoscopy?

A screening colonoscopy is performed when the patient does <u>not</u> have any symptoms, to look for cancer or polyps, which can be a precancerous growth.

A diagnostic colonoscopy is performed when the patient is having GI symptoms, such as diarrhea, abdominal pain or rectal bleeding, and a diagnosis needs to be established for the case of the symptoms.

Does insurance pay the same for a screening and diagnostic colonoscopy?

Most insurance companies cover a screening colonoscopy differently than a diagnostic colonoscopy. It is the patient's responsibility to understand the benefits provided by his/her insurance plan and how any tests or procedures are covered.

Can the doctor order a screening colonoscopy even if I am having symptoms so my insurance covers it better?

No. If a patient is having any symptoms, it must be scheduled as a diagnostic colonoscopy. It would be insurance fraud for the doctor to schedule it as a screening colonoscopy when symptoms are present.

Recommended Websites for additional information:

- ACG, the American College of Gastroenterologists.
 - o www.gi.org
 - Tab "Patients" for patient education and resource center



