Cancer risk reduction

- Practice healthy exercise habits
- Avoid using tobacco products, including smoking
- Limit exposure to second hand smoke
- Limit alcohol consumption
- Use sunscreen
- Avoid tanning beds
- Examine your skin regularly and recognize changes in moles
- Use protective barriers during all types of sexual interactions
- Know your personal and family cancer history
- · Ask if genetic counseling is appropriate for you
- Ask your primary care provider if the HPV vaccination is appropriate for you
- Be aware of changes to your body such as:
 - Differences in bowel movements and urination
 - New or unexplained pain
 - Sudden changes in appetite, unplanned weight loss or gain
 - Unusual swelling
 - Other irregularities

USPSTF guidelines

The United States Preventative Services Task Force (USPSTF) is a group of medical professionals who come together to decide on general screening recommendations for Americans. At the Swedish Cancer Institute, we seek to provide the highest level of care to our patients. Therefore, after thorough review by our expert physicians, our recommendations for cancer screening always meet, but often go above and beyond, the recommendations of the USPSTE.

Shared decision making

As with any medical decision, it is always important to speak to your doctor to determine which screenings are right for you.

Screening opportunities

The Swedish Cancer Institute offers screening services. If you have questions, concerns or would like to schedule a screenings appointment, please call 1-855-XCANCER (1-855-922-6237).

Resources

- To connect with us about a screening appointment, please call 1-855-XCANCER (1-855-922-6237).
- To learn more about genetic counseling or schedule an appointment with the Hereditary Cancer Clinic, please call 206-215-4377.
- If you believe or are unsure about your risk of breast or ovarian cancer, please call the High-Risk Breast and Ovarian Cancer Clinic about a risk assessment and plan at 206-215-6400.
- To learn more about the Lung Cancer Screening Program and smoking cessation, please call 206-386-6800.
- For more wellness information, visit us online or stop by the Cancer Education Center located at the Swedish Cancer Institute.



Swedish.org/cancer

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ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 888-311-9127 (Swedish Edmonds 888-311-9178) (TTY: 711).
注意: 以果您議中文,我們可以給您提供免費中文副課服務,講教電 888-311-9127 (Swedish Edmonds 989-311-9127 (TTV-711)

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Cancer Risk Reduction and Prevention





Extraordinary care. Extraordinary caring.

Cancer risk factors

If you check one or more of the following statements, you may be at an increased risk of cancer. Please speak with your doctor about your best screening options.

☐ Anal:	☐ Lung:
If you engage in anal sex	 If you are between the age of 55-77
 If you are HIV-positive, immune-suppressed 	AND
 If you are HPV-positive or have an HPV-positive partner 	 If you currently smoke or have quit smoking in the last 15 years
 Breast and ovarian: If you have any had any recent changes in your 	 AND If you have have smoked at least 1 pack of cigaretes per day for 30 years OR 2 packs
breasts (lumps, discharge, skin changes)If you have had a biopsy showing abnormal results	per day for 15 years
 If you have had radiation therapy to the chest before the age of 30 	 If you use tobacco and/or alcohol If you or a partner is HPV positive
 If you have had breast or ovarian cancer If you have a family history of breast or ovarian cancer If you are of Ashkenazi Jewish heritage 	 Prostate: If you have a family history of prostate cancer If you are of African-American heritage
If you have a mutation in BRCA genes	☐ Skin:
☐ Cervical:• If you have used an oral birth control for	 If you have a history of sunburns, especially early in life
more than three years	☐ Inherited genetic risk:
 If you had sex at a young age If you have had multiple sexual partners If you or a partner is HPV-positive If you are a smoker 	If you have a known inherited genetic risk such as:BRCA 1BRCA 2
☐ Colon:• If you have a family history of colon cancer	- Lynch Syndrome
 Liver: If you have any form of cirrhosis If you have hepatitis B or C 	

General cancer screening guidelines

Screening in medicine specifically refers to testing a population showing no symptoms or signs of disease. It does not refer to testing patients being evaluated for symptoms.

Breast cancer	 ☐ Yearly screening mammogram for women age 40 and older ☐ Yearly clinical breast exam ☐ Patients who are at high risk should speak with their doctor about more intensive screening recommendations or a referral to the High-Risk Breast and Ovarian Cancer Clinic.
Cervical cancer	 □ Age 21-29: Pap smear every 3 years □ Age 30-65: Pap smear every 3 years or, for patients who want to lengthen the screening interval, pap smear and HPV test every 5 years □ Age 65+: Screenings may not be needed if you've had normal test results for the past 10 years; please speak with your doctor.
Colon cancer	□ Age 50-75: Colonoscopy every 10 years OR □ Age 50-75: Stool based testing every year. An example of a stool-based test is the fecal immunochemical test (FIT). □ Age 76+: Speak with your doctor about repeat screenings
Prostate cancer	☐ Age 55+: Discuss screening options with your primary care provider about the potential benefits versus risks of screening for prostate cancer.