The **Montana Cancer Control Programs** follow the screening recommendations of the United States Preventive Services Task Force (USPSTF), which is an independent panel of non-Federal experts in prevention and evidence-based medicine. The USPSTF is composed of primary care providers, such as internists, pediatricians, family physicians, gynecologists/obstetricians, nurses, and health behavior specialists.

The USPSTF conducts scientific evidence reviews of a broad range of clinical preventive health care services and develops recommendations for primary care clinicians and health systems. These recommendations are published in the form of "Recommendation Statements." This fact sheet provides a synopsis of the USPSTF Recommendation Statements for breast, cervical and colorectal cancers.

Cervical Cancer

The United States Preventive Services Task Force (USPSTF) updated its cervical cancer screening recommendations in March 2012.

These updated screening recommendations apply to women who have a cervix, regardless of sexual history.

The recommendations do not apply to women who have received a diagnosis of a high-grade precancerous cervical lesion or cervical cancer, women exposed to DES or women who are immunocompromised.

The recommendations are:

- Women aged 21 to 65 should be screened for cervical cancer with cytology (Pap smear) every 3 years.
- Women aged 30 to 65 can be screened with a combination of cytology and human papillomavirus (HPV) testing every 5 years to lengthen the screening interval.
- Women younger than age 21 should not be screened for cervical cancer.
- Women who have had a hysterectomy with removal of the cervix and who do not have a history of a high-grade precancerous lesion (cervical intraepithelial neoplasia [CIN] grade 2 or 3) or cervical cancer should not be screened.
- Women should not be screened for cervical cancer with HPV testing alone.
- Women younger than age 30 should not be screened for cervical cancer with HPV testing in combination with cytology.
- Women older than age 65 who have had adequate screening and are not at high risk should not be screened.

Breast Cancer

In November, 2009 the USPSTF breast cancer screening guidelines were updated.

- Women aged 50-74 should have a screening mammography every other year.
- Women under the age of 50 should make the decision to start regular, every-other-year screening mammography with their medical service provider, taking into account patient context, including the patient's values regarding specific benefits and harms of screening tests.

Colorectal Cancer

- Both men and women age 50-75 should be screened for colorectal cancer by one of the following three regimens:
    - Annual high sensitivity fecal occult blood testing.
    - Sigmoidoscopy every 5 years combined with high-sensitivity fecal occult blood testing every 3 years.
    - Colonoscopy every 10 years.

Screening Resources in Montana

The **Montana Cancer Control Programs** provide mammograms, clinical breast exams, Pap tests and pelvic exams for the early detection of breast and cervical cancers and colonoscopies and FOBT tests for the early detection of colorectal cancer. Diagnostic testing is also provided for the follow-up of abnormal screening tests. For information about low cost screenings for eligible clients call toll-free, **1-888-803-9343**.

United States Preventive Services Task Force:
www.uspreventiveservicestaskforce.org
Montana Cancer Control Programs:
www.cancer.mt.gov

MONTANA CANCER CONTROL PROGRAMS

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Department of Public Health & Human Services