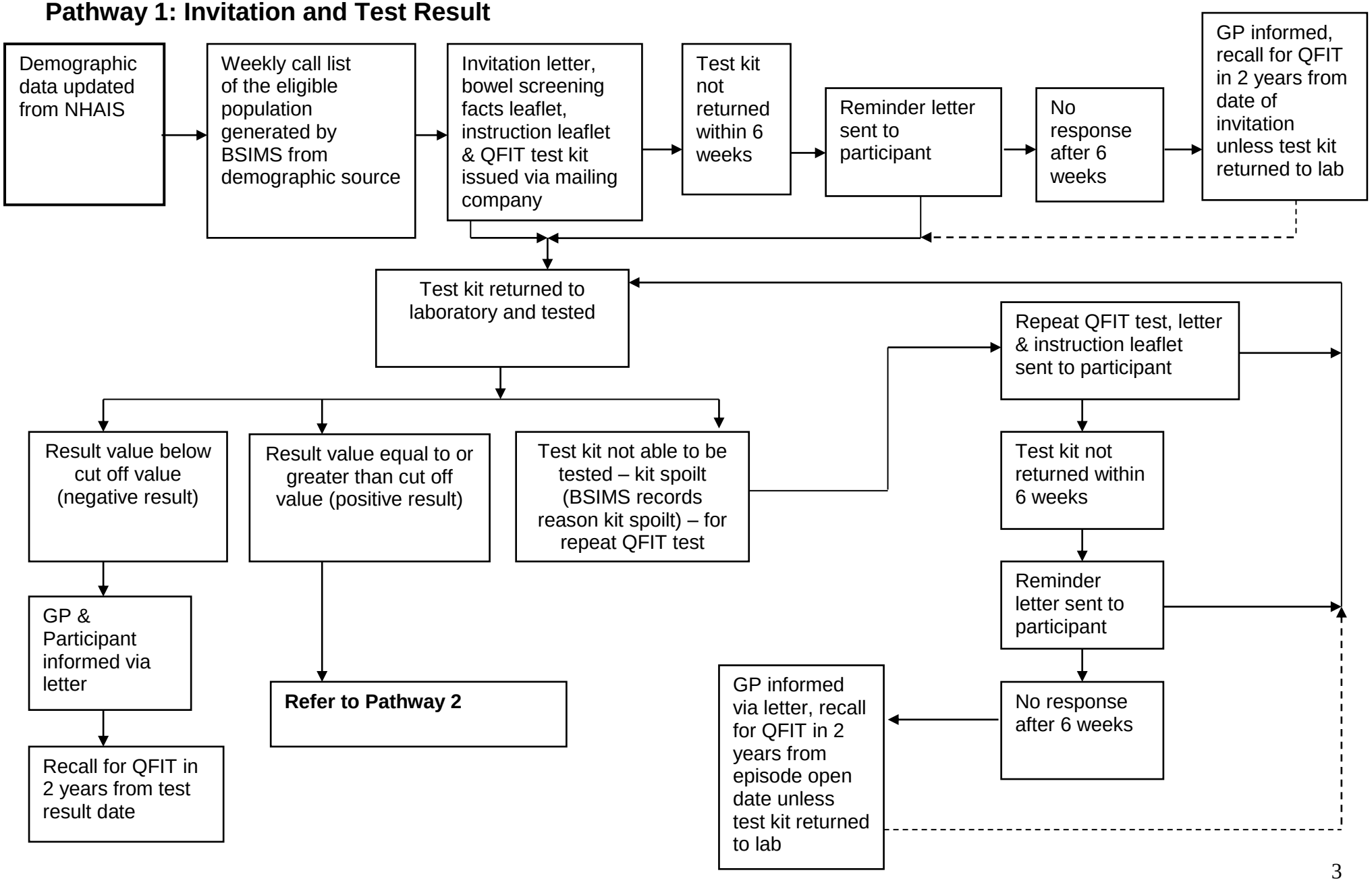
Northern Ireland Bowel Cancer Screening Programme

Pathways

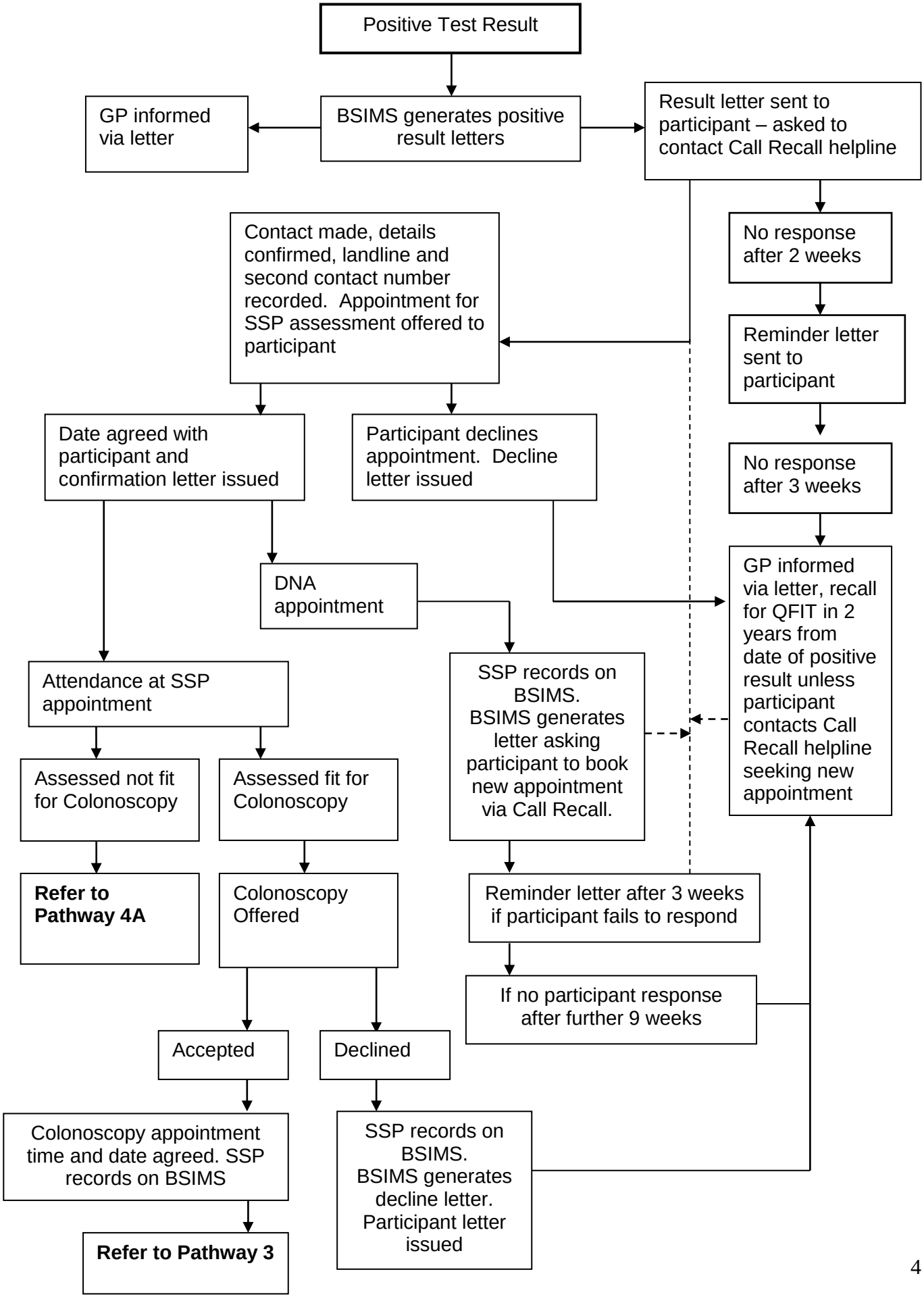
These changes will be version controlled, led by the Quality Assurance Director for the Programme. Any updated versions will be circulated and old versions should be withdrawn. Up to date versions will be held on the Northern Ireland Bowel Cancer Screening Programme website www.cancerscreening.hscni.net . If you would like to suggest a change please do so by contacting the Young Persons and Adult Screening Team (YPAST) via email screening.bowel@hscni.net

Version 6
June 2021

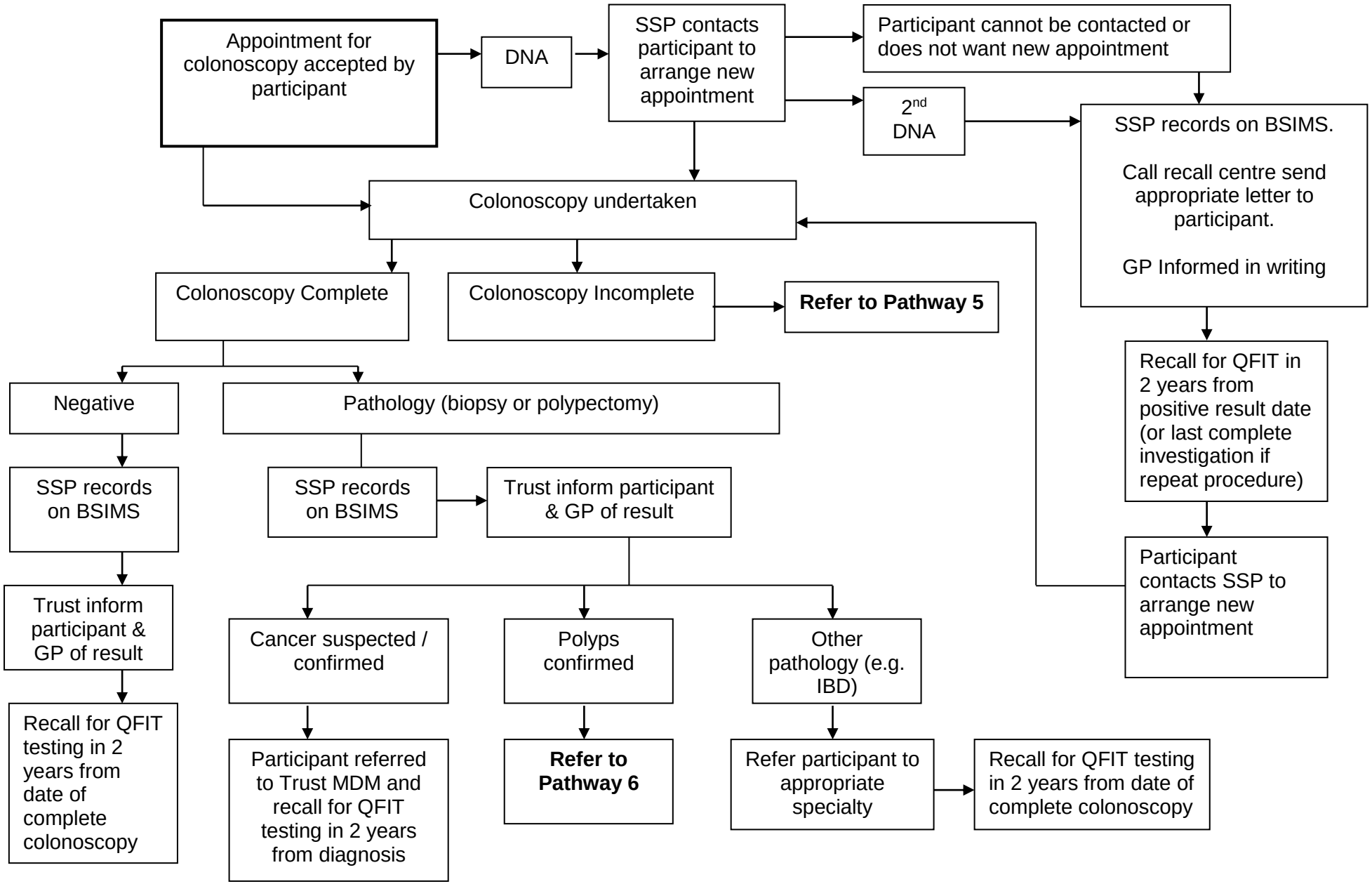
Pathway 1: Invitation and Test Result



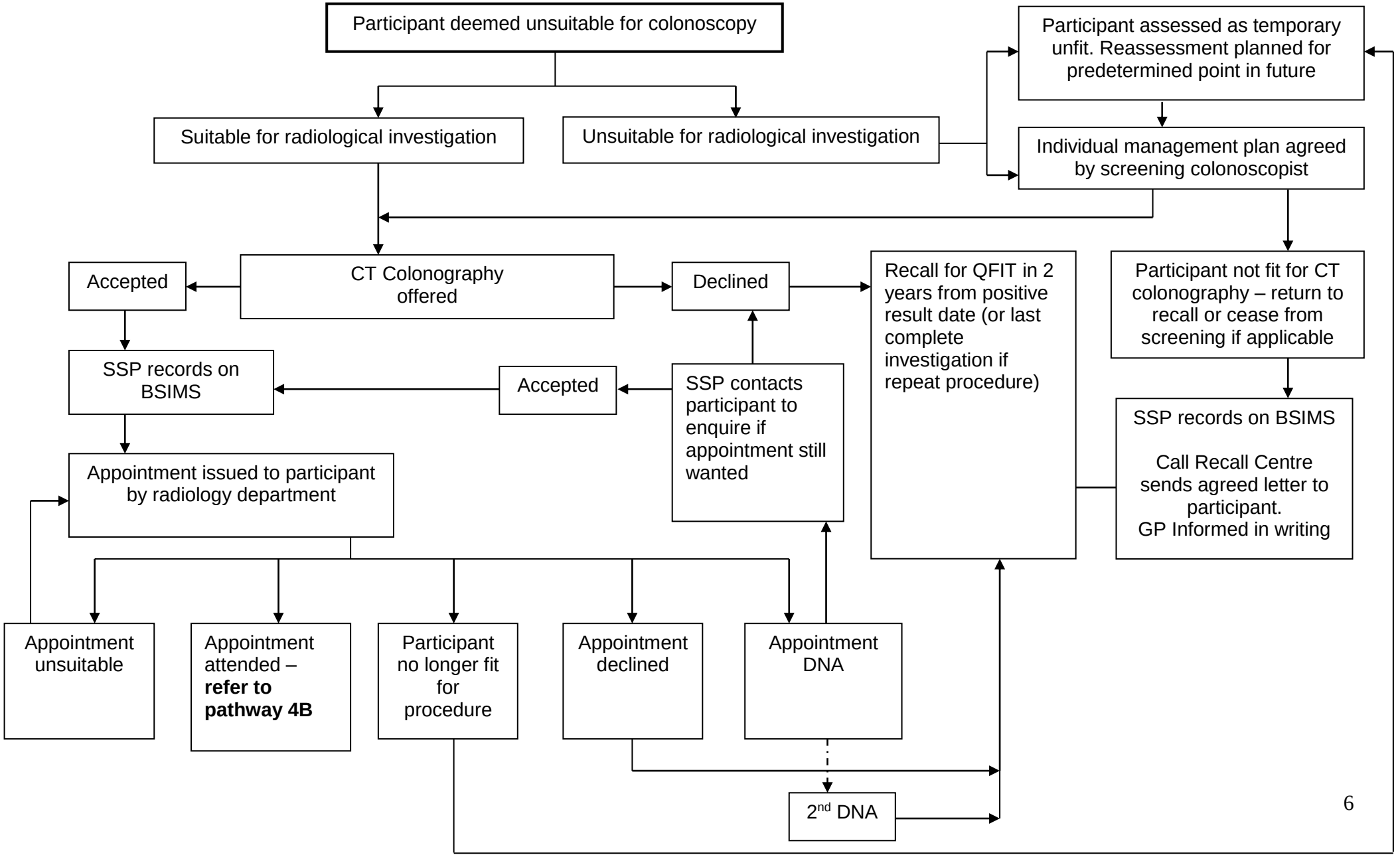
Pathway 2: Referral to Assessment



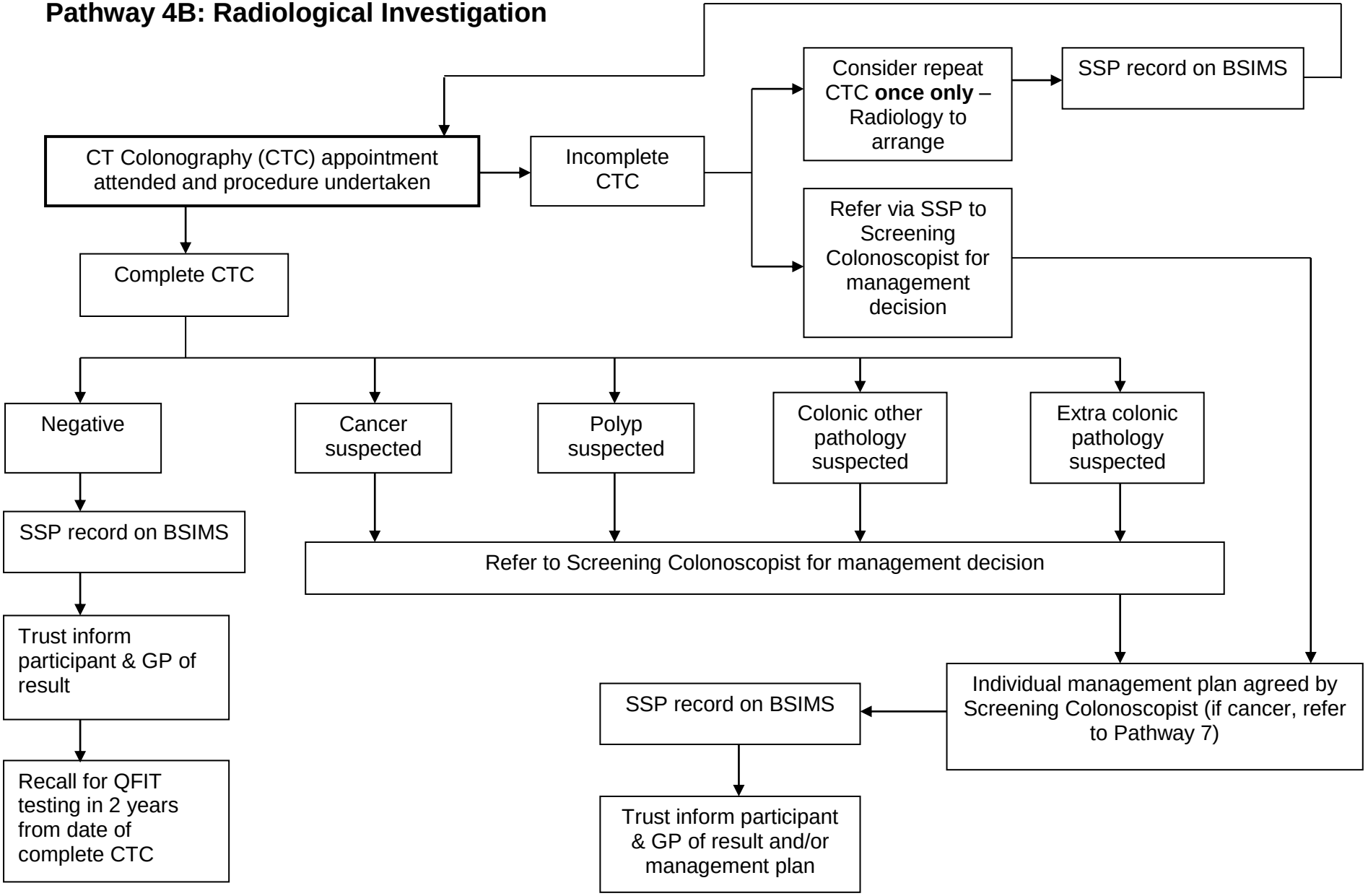
Pathway 3: Colonoscopy



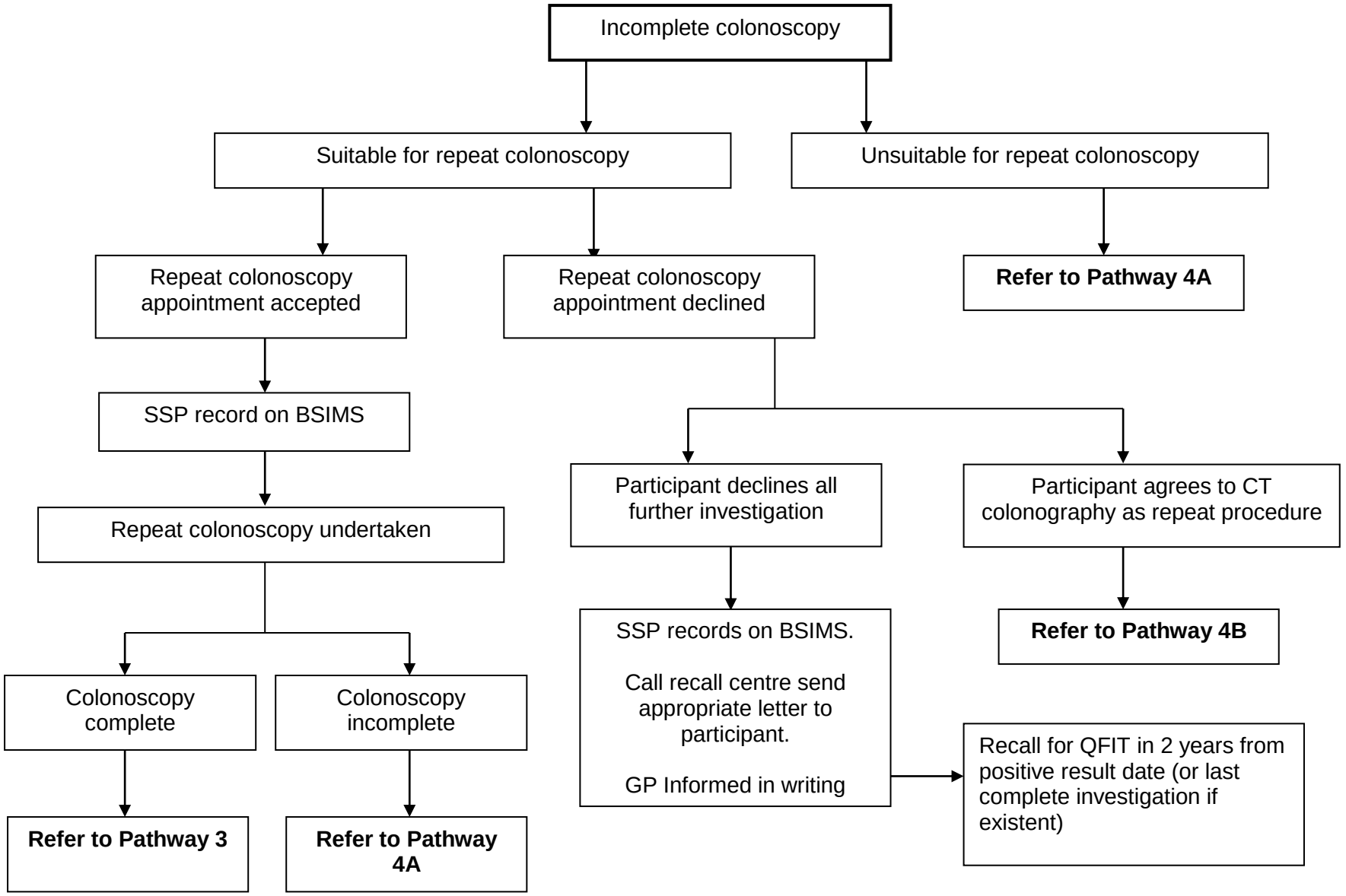
Pathway 4A: Unsuitable for Colonoscopy



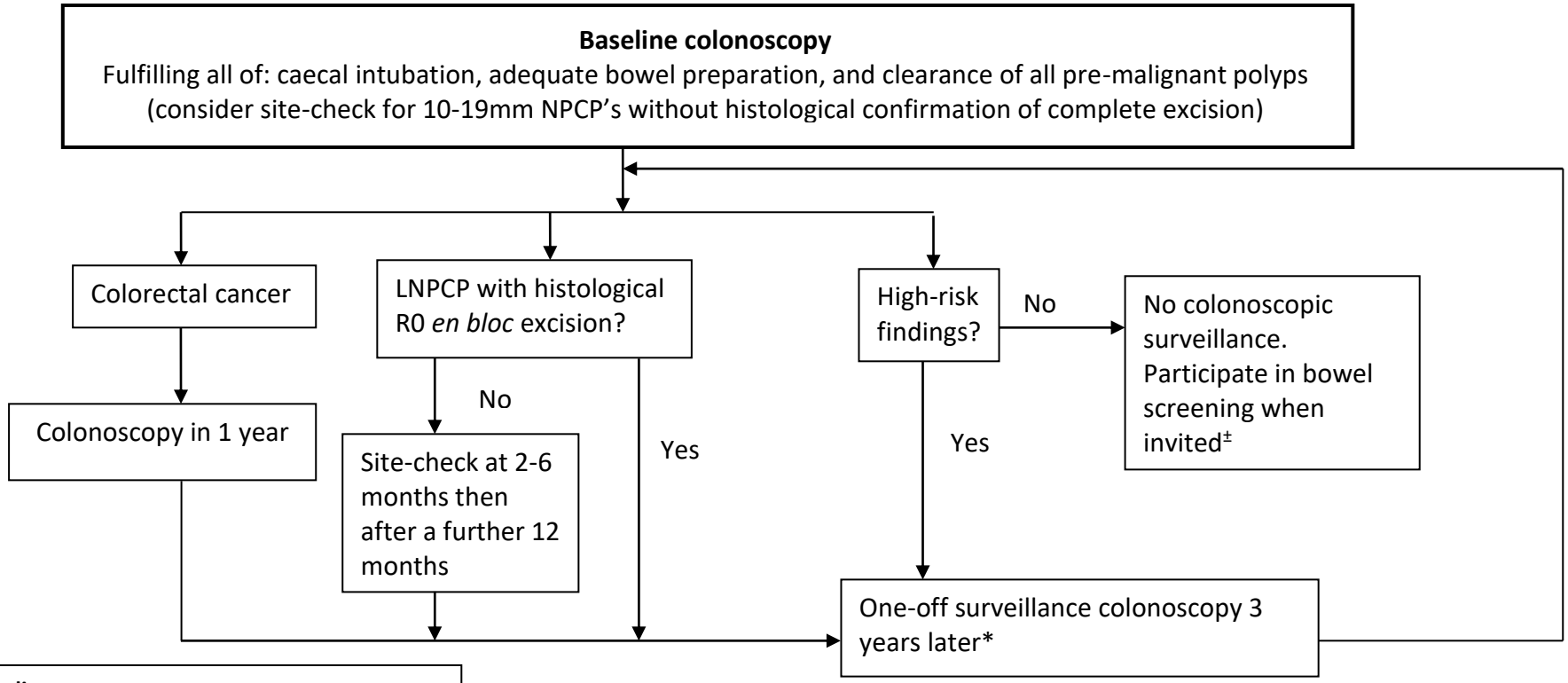
Pathway 4B: Radiological Investigation



Pathway 5: Colonoscopy Incomplete



Pathway 6: Polyp Surveillance



High-Risk Findings

- ≥ 2 pre-malignant polyps including ≥ 1 advanced pre-malignant polyp; or
- ≥ 5 pre-malignant polyps

Definitions:

- Serrated polyps: umbrella term for hyperplastic polyps, sessile serrated lesions, traditional serrated adenomas and mixed polyps
- Pre-malignant polyps: serrated polyps (excluding diminutive [1-5mm] rectal hyperplastic polyps) and adenomatous polyps
- Advanced colorectal polyps: serrated polyp ≥10mm, serrated polyp with dysplasia, adenoma ≥ 10mm, adenoma with high-grade dysplasia
- (L)NPCP: (Large, ≥ 20mm) non-pedunculated colorectal polyp

Exceptions

***** In general, we recommend no surveillance if life-expectancy <10y or if older than about 75y

± If patient is >10y younger than lower screening age and has polyps but no high-risk findings, consider colonoscopy at 5 or 10y

Refer to BSG hereditary CRC guidelines if:

Family history of CRC:

- 1 first-degree relative diagnosed CRC <50y, or
- 2 first-degree relatives diagnosed CRC at any age

Personal history of CRC:

- <50y
- Any age, who also has first-degree relative with CRC at any age

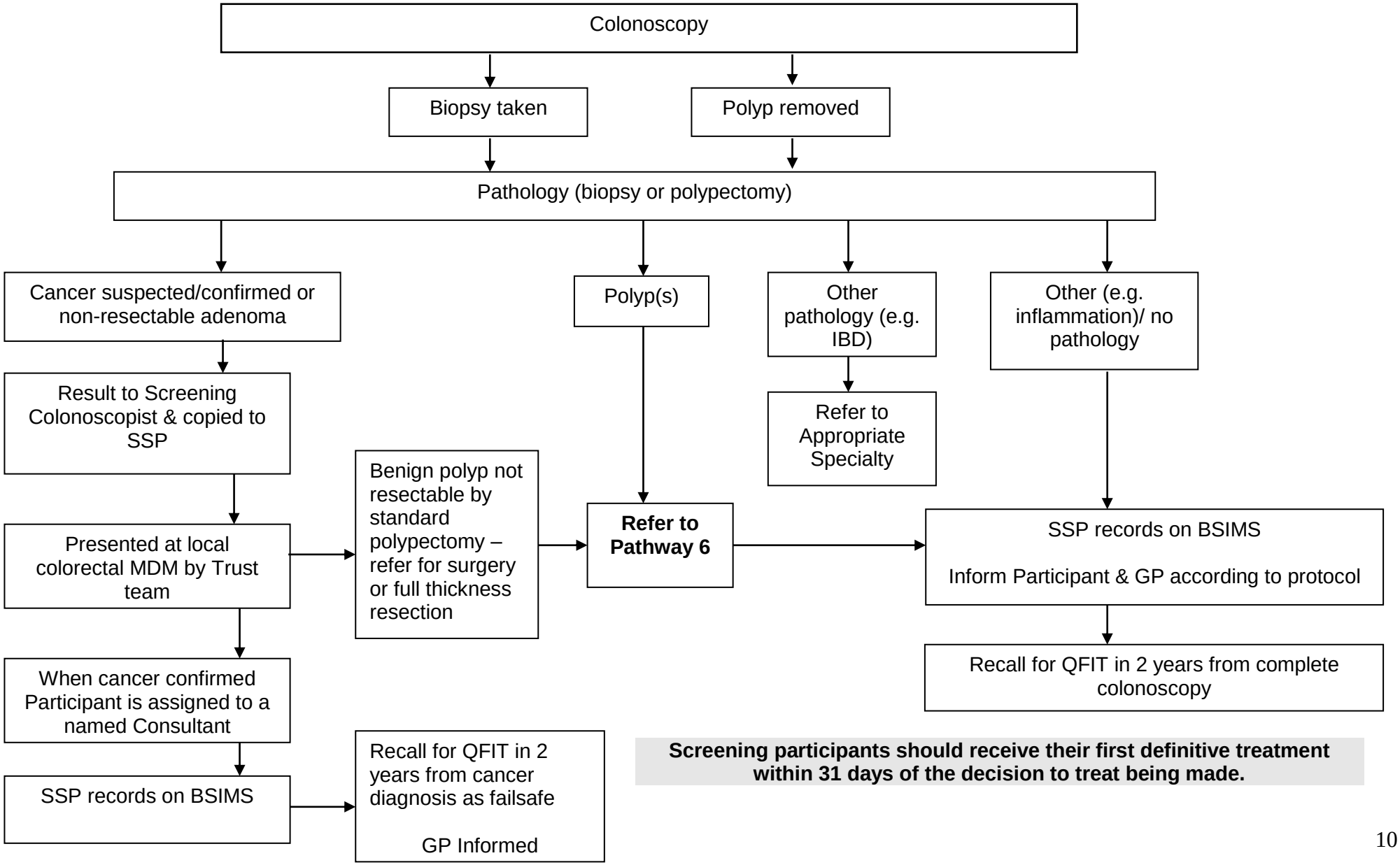
Personal history of multiple adenomas:

- <60y with lifetime total ≥10 adenomas; or
- ≥60y with lifetime total ≥20 adenomas, or ≥10 + FH CRC/polyposis

Known/suspected inherited CRC predisposition syndromes including:

- Lynch Syndrome or other polyposis syndrome
- Serrated Polyposis Syndrome
    - ≥5 serrated polyps ≥5mm prox to rectum, with ≥2 ≥10mm or
    - ≥20 serrated polyps (any size) including ≥5 prox to rectum

Pathway 7: Referral to the Colorectal Cancer Multi-disciplinary Meeting



Screening participants should receive their first definitive treatment within 31 days of the decision to treat being made.