





## CHECKLIST FOR TALKING WITH YOUR PATIENT ABOUT DOING A BOWEL SCREENING TEST

You can bulk order and issue kits directly to your patients, by registering with the National Cancer Screening Register Healthcare Provider Portal or integrating your clinical software. Learn more at www.ncsr.gov.au.

Topics for discussion	Further information or actions	
Eligibility for the National Bowel Cancer Screening Program		
They are aged 45-74	People not within the eligible age bracket of the program can talk to a health care provider about accessing a non-program bowel screening kit funded by Medicare. Non-program bowel screening kits can also be purchased at most pharmacies or online.	
They have a green Medicare Card or are registered with the Department of Veterans' Affairs	If not, encourage them to enrol in Medicare. If yes, in the HCP Portal, check the patient's details (including address) are up to date to ensure they receive follow up services and future screening invitations.	
Bowel screening history		
They have not done a bowel screening test or had a colonoscopy in the last 2 years.	Free screening with the program is available every 2 years. If they have not done the test or had a colonoscopy in the last 2 years, explain why it is important and encourage them to do the test.	

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RECONSIDER recommending bowel screening if they:		
have their menstrual period (wait     3 days after the period finishes     before doing the test)	It may not be appropriate for people with existing bowel conditions to do the bowel screening test. This includes anyone who has had a colonoscopy in the last 2 years, is scheduled for a colonoscopy or has had bowel surgery. If you are not a doctor, refer patient to one for further discussion before issuing a kit. People with no colon or rectum do not need to screen.	
have blood in their urine, poo,     or in the toilet bowl		
have piles (haemorrhoids) which are bleeding		
had a recent colonoscopy.		
Issue a kit via the National Cancer Screeni	ng Register and print the participant details form	
Check the person's details are correct and update them as needed.	The Register receives information for patients from Medicare. Sometimes this information is out of date but can be updated in the Register. This does not affect a	
Print a unique participant details form generated for the person to include when they mail their samples for testing. A reply-paid envelope is supplied with the kit.  Remind them to include the dates the samples were taken on the form and to sign it.	patient's Medicare data.  Complete the form 'Bowel Kit Issued by a Healthcare Provider' to generate a unique participant details form. This is done in the National Cancer Screening Register healthcare provider portal or the NCSR hub of your integrated software.  Print the form and give it to the patient. They must include the form with their completed samples when they mail them for testing. This ensures their samples can be tested and the result and reminders are sent to the correct address.  Watch a video or read instructions on completing this step at www.health.gov.au/nbcsp-kit-access.	
Explain the test		
It is important to do the bowel screening test every 2 years.	Bowel cancer can develop without any obvious signs. Even if someone feels fit and healthy it is important to screen every 2 years over the age of 45. Early detection is important. If found early, it can be successfully treated in more than 90% of cases.	
What is the test looking for?	The test is called a immunochemical faecal occult blood test (iFOBT) and detects small traces of blood in poo which can be a sign of bowel cancer.	
How to take the sample and do the test (go through the 4 steps using the brochure, flipchart or a demo screening kit).	To complete the test, collect 2 tiny samples from 2 different poos. Samples need to be kept somewhere cool, like in the fridge (don't freeze). If appropriate, offer to store the completed samples for your patient at your medical centre and post them.	

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The importance of <b>signing</b> the participant details form and <b>writing the dates</b> the samples were taken on it, and on the tubes.	The participant details form consents to the samples being tested and notification of the result being sent to the paricipant — and must be signed. Remind your patient to write on the sample tubes the dates each sample was collected, or they will not be tested.  Make sure both samples are collected and returned for testing within a period of 14 days.
Returning the samples and the participant details form (by mail, or to the health centre) in the reply-paid envelope.	Both completed sample tubes must be put in the reply-paid envelope with the participant details form. This ensures samples can be tested and the results and reminders sent to the correct address. A copy of the patient results will also be sent to the nominated healthcare provider. Post completed samples as soon as possible, ideally within 24 hours, by taking them into a post office so the samples stay cool. They don't require refrigeration during postage.
If they don't want to do the test they can <b>opt out or delay participation</b> in the National Bowel Cancer Screening Program.	This is not encouraged. However, reasons for deferring participation or opting out might include having had a recent colonoscopy, or another medical condition that precludes screening. Participants can opt-out of the program by contacting the Register at www.ncsr.gov.au or on 1800 627 701 or asking the healthcare provider to do this in the Register. Your patient can also opt back into program by contacting the Register.
Discuss what the test result means	
	e nominated healthcare provider within 4 weeks)
Negative result means the patient should screen again in 2 years	The patient and their nominated healthcare provider will be mailed a copy of the results. No further action is needed but some health centres may wish to contact the patient to reassure them what the result means and/or the importance of screening again in 2 years.
Positive result means that blood has been detected in one or both samples. This does not mean the patient has bowel cancer, but further investigation is needed to find out why the blood is there.	The patient and their nominated healthcare provider will be mailed a copy of the results and an alert will appear in the Portal against their record. An 8-week reminder letter will be sent to the patient and the nominated healthcare provider if a follow-up GP appointment has not occurred. A GP will likely refer the patient for further diagnostic testing such as a colonoscopy.

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Inconclusive result can happen for several reasons, including the patient providing only one sample, the samples were collected more than 28 days ago or the kit had expired.	The patient and their nominated healthcare provider will be mailed a copy of the results and an alert will appear in the HCP Portal against their record.  Contact the patient to encourage them to do the test again. Let them know that the Register will automatically issue them with a replacement kit to the
No result means the sample could not be tested. For example, if too much or no poo was provided, the collection tube was damaged, the kit is completed or tested after the expiry date, or samples were not tested within 14 days of the first sample.	address held in the Register. This could be the medical centre's address.
In your Practice Information Management S	System
Note they have been invited to screen and whether they have been given a kit /declined a kit/or been assessed as unsuitable.	The Register will automatically send a kit to an eligible patient through the mail-out model.
And if appropriate:	
set a reminder to follow-up     whether the patient has     completed the test	
set a reminder for another     bowel screening discussion     in two years' time	
make alternative arrangements     for monitoring the patient if     assessed as high risk	

Service on **13 14 50**