




COLON CANCER SCREENING:

Personal Decision Form

There are several different ways to screen for colon cancer. Each has possible benefits and risks. This form and video, together with your healthcare team, will help you make the decision that is best for you.

Please return this form with the video.

Your answers will tell us three important things:

Knowledge	
	How well we are doing our job of giving you information?
Values	
	What matters most to you?
Making Choices	
	How far along you are in decision making and what else you may need?

BEFORE WATCHING THE VIDEO, PLEASE ANSWER QUESTION 1 – 2

1. Have you talked with a healthcare provider about this decision?
 Yes
 No
2. At this time, which screening option are you leaning toward?
 Colonoscopy
 Sigmoidoscopy
 Stool blood test (or fecal occult blood test – FOBT)
 No Screening
 Unsure

NOW, PLEASE WATCH THE VIDEO

Knowledge



AFTER WATCHING THE VIDEO,
please check **one answer for each question.**

3. At what age should people at average risk who want to be screened, start getting regular screening tests for colon cancer?
- 35
 40
 50
 55
 I am not sure
4. Out of 100 adults, about how many will develop colon cancer in their lifetime?
- Fewer than 10
 10 to 19
 20 to 29
 30 or more
 I am not sure
5. How many fewer people out of 100 will die of colon cancer if they get the recommended screenings over their lifetime, compared to those who don't get screening?
- 1 to 2
 3 to 9
 10 to 20
 Greater than 20
 I am not sure
6. If 100 people have a fecal occult blood test (FOBT), how many will have a result that will lead to a follow-up colonoscopy?
- Less than 5
 5 to 14
 15 to 25
 26 or more
 I am not sure
7. Do you have any questions? Please list them here:
-

Values



On a scale from 1 to 10, where
1 is not at all important and 10 is very important:

- How important is it to you . . .
- Not at all important Very important
- . to try to find colon cancer early? 1 2 3 4 5 6 7 8 9 10
- . to avoid bowel preparation for a colon cancer screening procedure? 1 2 3 4 5 6 7 8 9 10
0. to avoid pain during a colon cancer screening procedure? 1 2 3 4 5 6 7 8 9 10
1. to avoid having a tube inserted into your rectum to have your colon examined? 1 2 3 4 5 6 7 8 9 10
2. to avoid anesthesia during a colon cancer screening procedure? 1 2 3 4 5 6 7 8 9 10



Making Choices

3. At this time, which screening option are you leaning toward?
- Colonoscopy
- Sigmoidoscopy
- Stool blood test (or fecal occult blood test – FOBT)
- No Screening
- Unsure
14. Do you feel sure about the best choice for you? Yes No
15. Do you know the benefits and risks of each option? Yes No
16. Are you clear which benefits and risks matter most to you? Yes No
17. Do you have enough support and advice to make a choice? Yes No
18. What do you plan to do next?
- Get the option I chose
- Get more information
- Talk now with a member of my healthcare team
- At my next visit, talk with my healthcare provider
- Other _____

Tell us about yourself

19. **Female** **Male**

20. Age: _____ years old

21. Education level:

- 8th grade or less
- Some high school
- Graduated high school or GED
- Some college or technical school
- Graduated college
- Postgraduate school or degree

Video Feedback

22. How would you rate the length of the video?

- Should be much shorter
- Should be a little shorter
- About right
- Could be a little longer
- Could be much longer

23. How balanced was this video's information about screening versus no screening for colon cancer?

- Clearly slanted towards screening
- A little slanted towards screening
- Completely balanced
- A little slanted towards no screening
- Clearly slanted towards no screening

24. Overall, how would you rate the video?

- Poor
- Fair
- Good
- Very good
- Excellent

25. Please write comments about the video or booklet here:
