

Increased and High Risk Definitions for Breast and Colorectal Cancers*

High Risk for Breast Cancer

An individual is determined to have one or more of the following:

- A 5-year risk of invasive breast cancer greater than, or equal to, 1.7%, or a lifetime risk greater than, or equal to, 20%.
- Known genetic predisposition for breast cancer by genetic testing (e.g. BRCA 1 or 2 mutation).
- Personal history of breast cancer and is not in active treatment.
- Personal history of receiving thoracic (chest) irradiation in her teens or 20s.

Increased Risk for Colorectal Cancer

An individual with any of the following:

- Personal history of adenomatous polyps or colorectal cancer found on a previous colonoscopy.
- A first-degree relative with a diagnosis of colorectal cancer or adenomatous polyps before age 55 (or two or more first-degree relatives at any age).

High Risk for Colorectal Cancer

An individual with any of the following:

- Inflammatory bowel disease such as:
 - o Chronic ulcerative colitis
 - Crohn's disease
- Personal or family history of genetic conditions such as:
 - Familial adenomatous polyposis (FAP)
 - Hereditary non-polyposis colon cancer (HNPCC)

*Risk must be determined by clinical risk assessment performed by a NYS-licensed clinical provider. CSP participating providers must submit clear documentation of an individual's risk status and/or assessment of signs and symptoms to the CSP contractor to determine CSP eligibility.

Center for Community Health & Prevention of the University of Rochester Medical Center manages and facilitates this collaborative effort in the Finger Lakes Region.