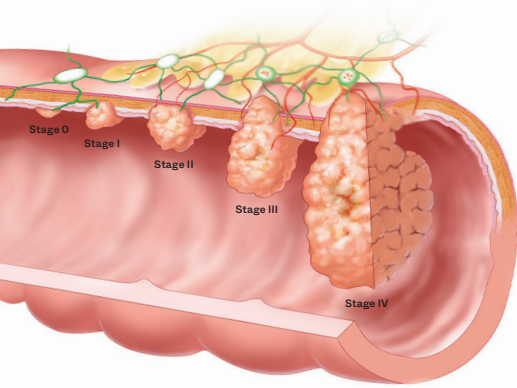


Screening for colorectal cancer (CRC) on time matters¹

Regular screening can help find CRC in early stages, which is why it's important to screen on time.¹
See how CRC develops below:



- CRC typically starts as a polyp on the wall of the colon or rectum which may **develop** into cancer¹
- Many people with early-stage CRC have **no symptoms**, but screening can detect signs of cancer¹
- **Black Americans** are most likely to develop and die from colon cancer²
- **Hispanic Americans** have the second-highest death rate due to colon cancer²

Focus on the CRC facts



Colon cancer affects all races, genders, and ethnicities²

3rd

It's the 3rd most common cancer among men and women³

75%

About 75% of people have no family history³



It's on the rise in people 45-49⁴

See your choices for CRC **screening** on the other side












When caught in early stages, CRC is more treatable in about **90% of people**^{5*}

There are many screening options, but whichever you choose, the American Cancer Society recommends regular screening starting at **age 45**. Even if you've screened before, you'll need to screen again when your healthcare provider recommends.^{1,4}

*Based on 5-year survival.

There are **choices** when it comes to CRC screening^{1,4,6-10}

Use this chart to help you decide which option might work best for you

| |  Colonoscopy (visual exam) |  Multitarget stool DNA test* (Cologuard®) |  FIT/FOBT* (fecal immunochemical test/fecal occult blood test) |
|--|---|---|---|
|  How does it work? | Uses a scope to look for and remove abnormal growths in the colon/rectum ¹ | Finds altered DNA and blood in the stool sample ¹ | Detects blood in the stool sample ¹ |
|  Who is it for? | Adults at high or average risk ^{1,6} | Adults 45+ at average risk ⁴ | Adults at average risk ⁴ |
|  How often? | Every 10 years ^{1†} | Every 3 years ⁴ | Once a year ⁴ |
|  Non-invasive? | No ^{1,7} | Yes, used at home ⁴ | Yes, used at home ¹ |
|  Prep required? | Yes, full bowel prep including fasting and laxatives ^{1,7} | No ⁸ | No/Yes ^{1‡} |
|  Time it takes? | 1-2 days for bowel prep and procedure ⁷ | The time it takes to collect a sample ⁶ | The time it takes to collect a sample ⁶ |
|  Covered?[§] | Covered by most insurers ⁴ | Covered by most insurers ⁹ | Covered by most insurers ¹⁰ |
|  After a positive result? | Polyps removed and examined (biopsy) ¹ | A colonoscopy is needed ¹ | A colonoscopy is needed ¹ |

*All positive results on non-colonoscopy screening tests should be followed up with timely colonoscopy.⁴

†For adults at high risk, testing may be more frequent and should be discussed with your healthcare provider.¹

*FIT does not require changes to diet or medication. FOBT requires changes to diet or medication.¹

§Insurance coverage can vary; only your insurer can confirm how CRC screening is covered under your insurance policy.

Choose the screening option(s) below to discuss with your prescriber today:



Colonoscopy

Multitarget stool DNA test*

FIT/FOBT*

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