Cancer Screening During the COVID-19 Pandemic

At the onset of the COVID-19 pandemic, elective medical procedures, including cancer screening, were largely put on hold to prioritize urgent needs and reduce the risk of the spread of COVID-19 in healthcare settings. One effect of this has been a large drop in cancer screening.

Most healthcare facilities are offering elective procedures again, including cancer screening. While many safety precautions are in place, how quickly you may be able to get screened may vary by community and facility while the pandemic continues.

Decisions about getting screened depend on many factors, and they may not be the same for every person. Starting or restarting cancer screening often means carefully thinking about the risks and benefits of screening, along with making sure both patients and healthcare personnel are protected against COVID-19 as much as possible.

Regular cancer screening is very important

If you had an appointment for screening that was postponed or canceled, talk to your healthcare team about rescheduling. Your provider can discuss balancing the risks and benefits of being screened now or postponing for a later date, taking into account your personal and family history, other risk factors, and the timing of your last screening test.

It is also important to keep in mind that we’re focusing here on cancer screening. Screening tests look for cancer in people who don’t have symptoms. These tests are different from tests your doctor might order if you have symptoms that could be from cancer. If you have signs or symptoms that might be from cancer, for instance, a lump in the breast or blood in the stool, you should discuss this with your provider right away, as you will need exams or tests that evaluate those particular signs and symptoms.
It is safe to get cancer screening tests

Health care facilities that provide cancer screening tests have precautions in place to be sure that screening tests are done as safely as possible. The US Centers for Disease Control and Prevention (CDC) has recommendations for healthcare facilities\(^1\) to reduce the risk of COVID transmission:

- Screening centers should be available to answer questions from patients via phone or web portal before and/or after the screening procedure.
- Patients should be pre-screened for COVID-related symptoms before screening appointments.
- Scheduling of appointments should allow for physical distancing between patients, and longer appointment times, if needed, to avoid crowding in waiting rooms and patient care areas.
- If not done in front of you, the screening center should be able to tell you how often equipment and surfaces are disinfected and cleaned.
- Everyone, including patients and staff, should wear a face covering or face mask, where appropriate. There should be frequent handwashing and use of hand sanitizer by staff, patients, and visitors.

You may have options for cancer screening

Screening recommendations are general recommendations for large groups of people, but there may be flexibility for some cancer screening tests. For example:

Many women get cervical cancer screening\(^2\) every year. However, no organization recommends cervical cancer screening with a Pap test any more often than every 3 years, and if an HPV test is used, no more often than every 5 years. If you have had normal test results in the past, getting cervical cancer screening at this time is not urgent.

Many women get an annual mammogram for breast cancer screening\(^3\). However, leading organizations that issue screening guidelines recommend that average risk women ages 55 and older can be screened every two years. If you are 55 or older and had a normal mammogram within the last year, you could choose to have your next mammogram up to 24 months after your last one.

There are several options for colorectal cancer screening\(^4\) for people at average risk. For example, stool tests, such as fecal immunochemical testing (FIT) or a stool DNA
test (such as Cologuard), can be done safely at home. If the stool test result is positive, you will need a colonoscopy, and it will be important to talk with your doctor about the safest way to proceed with this. Colonoscopy as a screening test is still an option, but it may be harder to get an appointment now compared to before the COVID-19 pandemic.

Your health care provider can help you determine what screening schedule and which screening tests are best for you at this time.

We hope this information provides useful guidance as you consider starting or resuming cancer screening. Every community has its own unique situation and will need to rely on the judgment of the health care professionals and leaders in the community to make the best decisions possible.

This information is intended to help you understand the importance of getting back on track with regular cancer screening. At the same time, it’s important to remember that if you have signs or symptoms of cancer, or if you have additional risk factors that put you in a high-risk group, you should consult your doctor or a health provider right away for guidance.

As always, we remain available to discuss your questions and concerns. Live chat is available through our website or you can call us anytime, day or night, at 1-800-227-2345.

Hyperlinks


Last Revised: April 23, 2021

Written by

The American Cancer Society medical and editorial content team (www.cancer.org/cancer/acs-medical-content-and-news-staff.html)
Our team is made up of doctors and oncology certified nurses with deep knowledge of cancer care as well as journalists, editors, and translators with extensive experience in medical writing.

American Cancer Society medical information is copyrighted material. For reprint requests, please see our Content Usage Policy (www.cancer.org/about-us/policies/content-usage.html).