## **KEY THINGS TO KNOW ABOUT FIT**



**The Faecal Immunochemical Test (FIT)** is a type of faecal occult blood test used to detect traces of human blood in stool samples. FIT can be used:

- as the primary test in the NHS Bowel Cancer Screening Programme (BCSP), aimed at individuals without symptoms (phased screening implementation due to start late 2018).
- as a test to guide the management of individuals who present with symptoms (symptomatic)

There are **significant differences** between each use of FIT which are important for health professionals to be aware of. This includes the threshold for all abnormal results; e.g, a patient might test normal following screening, yet receive an abnormal result, requiring further action, when tested symptomatically.

## **SCREENING**



 FIT will automatically be offered to people who meet the eligible age criterion\*



2. The kit is sent to eligible individuals in the post



**3.** The completed kit is returned by post to the screening hub



**4.** The threshold for determining an abnormal result is high



**5.** GPs are informed of all results (normal/abnormal) and can receive these electronically



**6a.** Those with an abnormal result are invited to a colonoscopy pre-assessment appointment



 b. Those with a normal result will be eligible for future screening every two years



 c. If the screening test is normal yet colorectal symptoms develop, GPs should consider the FIT symptomatic pathway

## **SYMPTOMATIC**



1. FIT is offered to people who have certain symptoms (NICE DG30 criteria)



2. The kit is given out by the GP, or sent to the patient by the lab once a GP has requested a kit



**3**. The completed kit is returned to the GP or directly to the lab



**4.** The threshold for determining an abnormal result is low



5. GPs will be given a result (normal/ abnormal) and this may also include a numeric value



**6a.** Those with an abnormal result are not automatically referred – GPs need to send them on a 2WW



**b.** Those with a normal result may still warrant routine referral or further investigation



 c. Those with a normal result may still have cancer – primary care clinicians should be vigilant for ongoing, changing or worsening symptoms

\*In England the BCSP currently invites all people between the ages of 60-74 years every two years

October 2018

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Together we will beat cancer

