



John Doe
Mannerheimintie 2
00100 Helsinki

12 February 2019
Helsinki

SCREENING FOR COLORECTAL CANCER

Answer all of the questions on this form by ticking the box for all correct response options or using numeric values in the space provided.

Return the completed form in the same envelope together with the screening sample. You can also answer the questionnaire online. Then the form does not need to be returned.

ANSWERING THE QUESTIONNAIRE ONLINE:

You can access the medical history form by entering www.fimlab.fi/suolistoseulonta on the browser and adding your personal code in the reserved space.

Write the sampling date on the label below and attach it to the sample tube according to the given instructions.

YOUR CODE	XXXXXXXXXXXX
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<p>1 How tall are you?</p> <p>_____ cm</p>	<p>2 What's your weight?</p> <p>_____ kg</p>
<p>3 Have you any of the following long-term illnesses?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Insulin-treated diabetes <input type="checkbox"/> Heart valve disease <input type="checkbox"/> Myocardial infarction in the past 3 months <input type="checkbox"/> Severe lung or heart disease <input type="checkbox"/> Severe illness limiting mobility 	<p>4 Have your relatives been diagnosed with colon cancer or rectal cancer?</p> <ul style="list-style-type: none"> <input type="checkbox"/> No <input type="checkbox"/> Yes, my parent <input type="checkbox"/> Yes, my sibling <input type="checkbox"/> Yes, my child <input type="checkbox"/> Yes, some other relative(s) (e.g. aunt, cousin) <input type="checkbox"/> Don't know

<p>5 Do you take the following drugs regularly, at least once a week?</p> <p><input type="checkbox"/> Blood thinner (e.g. Marevan, Pradaxa, heparin)</p> <p><input type="checkbox"/> Acetylsalicylic preparations (e.g. Asperin, Disperin, Primaspan)</p> <p><input type="checkbox"/> Other anti-inflammatory analgesic (e.g. Burana)</p>	<p>6 Are you hypersensitive to a drug?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, which:</p> <p>_____</p> <p>_____</p>
<p>7 Have you ever smoked cigarettes, cigars, or a pipe daily for at least a year?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, for a total of _____ years about _____ cigarettes/pipefuls a day</p>	<p>8 Do you currently smoke cigarettes, cigars, or a pipe daily?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>9 How often do you drink alcoholic beverages? (include the times when you have only small amounts, e.g. one beer)</p> <p><input type="checkbox"/> I don't use alcoholic beverages at all</p> <p><input type="checkbox"/> About once a month or less frequently</p> <p><input type="checkbox"/> 2–4 times a month</p> <p><input type="checkbox"/> 2–3 times a week</p> <p><input type="checkbox"/> 4 times a week or more</p>	<p>10 How many units of alcohol do you usually consume on days when you drink alcohol? (unit = a small bottle or can of beer/cider/long drink, a glass of wine, a shot)</p> <p><input type="checkbox"/> 1–2 units</p> <p><input type="checkbox"/> 3–4 units</p> <p><input type="checkbox"/> 5–6 units</p> <p><input type="checkbox"/> 7–9 units</p> <p><input type="checkbox"/> 10 units or more</p>
<p>11 How often do you drink at least six units of alcohol within 24 hours? (six units = six small bottles or cans of beer/cider/long drink, a bottle of wine or half a bottle of spirits)</p> <p><input type="checkbox"/> Never</p> <p><input type="checkbox"/> Less than once a month</p> <p><input type="checkbox"/> About once a month</p> <p><input type="checkbox"/> About once a week</p> <p><input type="checkbox"/> Daily or almost daily</p>	<div style="display: flex; align-items: flex-start;"> <div style="margin-right: 20px;">  </div> <div> <p>1 UNIT</p> <p>0.33 litre bottle or can of medium-strength beer or cider</p> <p>12 cl glass of wine</p> <p>4 cl unit of spirits</p> </div> </div> <div style="display: flex; align-items: flex-start; margin-top: 20px;"> <div style="margin-right: 20px;">  </div> <div> <p>1.5 UNITS</p> <p>0.5-litre bottle of medium-strength beer or 0.5-litre glass</p> </div> </div>

ADDITIONAL INFORMATION

More about screening for colorectal cancer: www.suolistoseulonta.fi

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