

Pearls – What NOT to do		
	Cancer Screening	
1.	Prostate Cancer by rectal exam or PSA, and absolutely not for screening of those over 70 years.	Do not screen for prostate cancer with PSA https://canadiantaskforce.ca/guidelines/published-guidelines/prostate-cancer/ CTFPHC 2014
2.	Ovarian Cancer: tumor marker, u/sd or bimanual exam.	Do not screen for ovarian cancer CTFPHC 2013 https://canadiantaskforce.ca/portfolios/ovarian-cancer/
3.	Uterine Cancer bimanual exam	Do not perform routine screening pelvic examination to screen for uterine or ovarian cancer. CTFPHC 2016. https://canadiantaskforce.ca/guidelines/published-guidelines/pelvic-exam/
4.	Testicular cancer regular exam or self-exam	This disease has high treatment success when it presents clinically. There is little evidence that documents the value of screening examinations. Cochrane. 2011. http://cochranelibrary-wiley.com/doi/10.1002/14651858.CD007853.pub2/abstract;jsessionid=780E107425E3926ABFB87EEE15C09D22.f03t03
5.	Breast self-examination*. Doctor breast exam*. Thermography*	Do not advise women to practice routine breast self-exam. Do not routinely perform clinical breast exam CTFPHC 2011 https://canadiantaskforce.ca/breast-cancer-clinician-cbebse-recommendation/ Thermography machines are not effective to screen for breast cancer https://onlinelibrary.wiley.com/doi/full/10.1002/ima.22051 https://www.nzma.org.nz/journal/read-the-journal/all-issues/2010-2019/2012/vol-125-no-1351/articel-fitzgerald
6.	Chest XR, Sputum cytology for Lung Ca, CT lungs	Chest x ray with or without sputum cytology is not effective to screen for lung cancer. Low dose CT is effective, but only for high-risk patients when performed in a quality-controlled program. CTFPHC 2016 https://canadiantaskforce.ca/guidelines/published-guidelines/lung-cancer/
7.	Whole body CT: 40% false positive	CT may detect some disease, but also overdiagnoses many lesions and cause substantial harms because of this. https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2665734
8.	CT colonoscopy, colonoscopy for normal risk people.	Do not use colonoscopy as a screening test for colon cancer. CTFPHC 2016 https://canadiantaskforce.ca/guidelines/published-guidelines/colorectal-cancer/ https://www.topalbertadoctors.org/download/1009/colorectal_guideline.pdf
	Other	

9.	Regular EKG	Do not screen with resting or exercise ECG in asymptomatic adults. USPSTF 2012 https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/coronary-heart-disease-screening-with-electrocardiography
10	CBC routine, LFT routine. TSH routine, T4 Homocysteine, B12, Ferritin.	Do not order CBC for screening asymptomatic adults http://www.cfp.ca/content/63/10/772 Screening for homocysteine levels in asymptomatic adults does not reduce the incidence of CHD events. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4042912/ Current evidence is insufficient to assess the benefits of screening for thyroid dysfunction in nonpregnant, asymptomatic adults. USPSTF 2015. Harms are likely. https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/thyroid-dysfunction-screening
11	Routine repeated screening for STD/HIV in low-risk populations (includes urine chlamydia screening).	Do not screen those at low risk. Screen patients whose sexual history reveals new or persistent risk factors since the last negative test result. USPSTF 2014 https://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening
12	Urinalysis/microalbumin as routine for everyone	Accuracy of urine dipstick is low. http://cjasn.asnjournals.org/content/8/1/131.full
13	Glaucoma screening (optometrists do it better)	Do not screen for vision problems among those aged 65 years and over without vision concerns CTFPHC 2018 https://canadiantaskforce.ca/guidelines/published-guidelines/impaired-vision/
14	COPD screening with spirometry	Do not screen for COPD with spirometry USPSTF 2016 https://www.aafp.org/afp/2016/0715/od1.html CFPC / CTS 2008. http://www.cfpc.ca/ProjectAssets/Templates/Resource.aspx?id=1251&langType=4105
15	Neck auscultation for carotid bruit	Do not screen for asymptomatic carotid stenosis. USPSTF 2015 https://www.aafp.org/afp/2015/0515/od1.html
16	Routine hormone treatment at menopause	Do not use estrogen alone or combined estrogen and progestin for the primary prevention of chronic conditions in post-menopausal women. USPSTF 2017. https://www.uspreventiveservicestaskforce.org/Home/GetFile/1/16745/hormone-therapy-final-rec-statement/pdf
17	Testing for Vit. D or 25 (OH) vitamin D. Routine prescribing of Calcium tablets.	Do not routinely test for Vitamin D in patients. ACFP 2014. https://www.acfp.ca/wp-content/uploads/tools-for-practice/1397843445_20140203_102028.pdf Calcium should be obtained from diet in preference to supplements. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3970298/

18	Dementia or depression screening* for unselected pts, especially if no integrated follow up	<p>Do not routinely screen for depression CTFPHC 2013 https://canadiantaskforce.ca/guidelines/published-guidelines/depression/</p> <p>Do not routinely screen asymptomatic adults aged 65 and over for cognitive impairment CTFPHC 2015 https://canadiantaskforce.ca/guidelines/published-guidelines/cognitive-impairment/</p> <p>Be aware of signs that raise suspicion</p>
19	Recommendations to take vitamins or minerals, except for deficiency states.	<p>Do not give β-carotene or vitamin E for the prevention of cardiovascular disease or cancer. Current evidence is insufficient to assess the balance of benefits and harms of multivitamins for the prevention of cardiovascular disease or cancer. USPSTF 2014. http://annals.org/aim/fullarticle/1832969/vitamin-mineral-multivitamin-supplements-primary-prevention-cardiovascular-disease-cancer-u</p>