

# **FAST FACTS** FIT for Clinicians



**Recommended Course** Faecal Immunochemical Test

## **Get Started**



### **EXAMINATION**

Patients should be referred on a colorectal suspected cancer pathway without FIT if they have an anal or rectal mass or anal ulceration. It is vital that all patients are examined, including via DRE.



## SAFETY NETTING

Consider formal safety netting processes to ensure samples are returned and results are acted on.





A small percentage of patients with a negative FIT will have colorectal cancer and FIT does not exclude other cancers. Ensure patients are given clear safety netting instructions and consider referring patients with persistent symptoms.





TEST

A FIT kit should be requested in all patients with symptoms of colorectal cancer (except anal or rectal mass, or anal ulceration), including those with rectal bleeding. A referral should be made if the test is positive  $(usually \ge 10 \mu g Hb/g).$ 

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### **SAMPLES**

Patients may worry about the practicalities of collecting a sample. Take time to talk them through what to do.

### Remember



Remind your patients which container to use and how to label the sample correctly.

### SCREENING THRESHOLDS

The FIT symptomatic threshold is much lower than the FIT screening threshold. GPs should always offer eligible symptomatic patients a FIT symptomatic kit, even if they recently had a negative screening result.

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