

Surveillance after Polypectomy (COLON-3)

Colonoscopy is considered the standard of care and performed routinely for colorectal cancer (CRC) screening and surveillance after CRC and polyp removal. Risk of metachronous advanced neoplasia is associated with findings on prior colonoscopy. After colonoscopy, patients with no neoplasia detected are at the lowest risk, and those with polyps are risk-stratified based on the histology, number, location, and size of polyps detected. The US Multi-Society Task Force recommendations for post-colonoscopy follow-up and polyp surveillance were published in the *Gastroenterology* in 2012. Updated Guidelines by the Multi-Society Task Force entitled “Recommendations for Follow-Up after Colonoscopy and Polypectomy: A Consensus Update by the US Multi-Society Task Force on Colorectal Cancer” were published jointly in *Gastrointestinal Endoscopy*, *Gastroenterology*, and *The American Journal of Gastroenterology* in 2020, and represent the most recent recommendations and the present standard for surveillance after polypectomy. As the primary goals of colonoscopy screening and post-polypectomy surveillance are to reduce CRC incidence and mortality, these updated Guidelines provide recommendations for follow-up strategies toward achievement of those outcomes.

References:

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