

Rx FOR SUCCESS Co

Colon Polyps

A colon polyp is a tumor of the inner lining (mucosal surface) of the colon (large intestine). They may be broad based (called sessile) or pedunculated (attached by a stalk). Colon polyps can cause symptoms such as bleeding, but the real concern is their pre-malignant potential.

If a colon polyp is found on a flexible sigmoidoscope exam or barium enema, a full colonoscopy is done to look for and remove all polyps. Once removed, they are sent to the pathologist for diagnosis. The malignant potential of a polyp is determined by:

- Size
- Sessile vs. Pedunculated
- Pathology
- ▶ Grade

Less than 1% of all polyps are malignant. Polyps that are called hyperplastic by the pathologist have little to no risk of progression to cancer. There are several polyps that can progress to cancer:

- ▶ Tubular
- Tubulovillous
- Villous

Of this group, villous polyps are most likely to be large in size and contain cancer. After one polyp is removed, there is an increased risk of developing another polyp. Typical follow-up is full colonoscopy every 3-5 years.

UNDERWRITING CONSIDERATIONS

Colon polyp present, under 1 cm in size; well-followed	No rating
Colon polyp present, over 1 cm in size	Decline
Colon Polyp removed, benign, with good follow-up with unknown follow-up, no villous elements with unknown follow-up of dysplastic or villous polyp	No rating No rating Table B

If cancer is found within the polyp, colon cancer rates apply; see Rx for Success #24 on Colorectal Cancer.

To get an idea of how a client with Colon Polyps would be viewed in the underwriting process, use the Ask "Rx" pert Underwriter on the next page for an informal quote.

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Ask "Rx"pert Underwriter (A	sk Our Expert)	
After reading the Rx for Success on Colon Polyps, use this form to Ask "Rx" pert Underwriter for an informal quote.		
Producer	Phone	Fax
Client	Age/DOB	Sex
If your client has had colon polyp	s, please answer the following:	
1. Please list date(s) of diagnos	s.	
2. Please note pathology type. (Check all that apply.)	
Hyperplastic		
🗖 Tubular		
☐ Tubulovillous		
□ Villous		
3. Any history of colorectal cano	er?	
☐ Yes. Please give most rece	nt test results	
□ No		
4. What size was the polyp(s)?		
5. Have all polyps been remove	1?	
☐ Yes. Please give most rece	nt test results	
□ No		
6. Please note date of last follo	v-up colonoscopy.	
7. Is your client on any medicat	ions?	
8. Has your client smoked cigar	ettes in the last 12 months?	
☐ Yes. Please give details.		
□ No		
9. Does your client have any oth	er major health problems (e.g., heart disease	, etc.)?
☐ Yes. Please give details.		