

CANCER SCREENING

Q&A With Your Provider

Suggested questions you may want to ask your provider during your next screening visit.



It's important to have an open discussion with your health care provider. Having specific questions to guide your discussion can help you better understand the screening process and help lower your cancer risk.

Here are a few simple questions to consider during your next screening appointment.

General questions you can ask during your appointment:	
1. Why should I get screened?	
2. What cancer screenings should I get?	
3. How often should I get screened?	
4. How should I prepare for the screening appointment?	
5. What happens if the screening shows a positive result?	

If you have questions or concerns related to your cancer screenings, please call your ScreenNJ Patient Navigator at 833-727-3665.

Additional cancer prevention questions you may want to ask:

 What preventative cancer screening types are recommended for my age?
2. How often should I get screened for the types recommended?
3. Where can I go to get my screening test completed?
4. How do I schedule my screening test, and can someone assist me with this process?
5. Will I have to cover the cost of my screening test?

Additional cancer prevention questions you may want to ask:

6.	What are the risks and benefits of getting screened now compared to putting it off until later, given my personal and family history, risk factors, and when I got my last screening test?
7.	When will I get the results of my screening test?
8.	Do I need to schedule a follow-up appointment to review my test or can I receive a phone call?
9.	Can I have a copy of my test results?
10	.Other questions I may have:

My next appointment date/time:

A patient navigator can help you develop additional questions for your visit. Please contact us at **1.866.727.3665** or at **patientnavigation@CINJ.Rutgers.edu** for more information about our free ScreenNJ Patient Navigation services.

Easy Reference:

Fill in Your Providers' / Specialists' Contact Information Below		
Provider Type:		
Name:		
Phone Number:		
City/Town:		
Provider Type:		
Name:		
Phone Number:		
City/Town:		
Provider Type:		
Name:		
Phone Number:		
City/Town:		

Additional Notes:

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Scan the QR Code or visit the link to get more information about how you can connect with a Patient Navigator and schedule your screening.



https://go.rutgers.edu/ScreenNJ-DrQA

