

The [National Comprehensive Cancer Network \(NCCN, v 1.2018\)](#) has recommended the following guidelines for when to refer a patient for further genetic risk evaluation for a hereditary polyposis syndrome:

FAMILIAL ADENOMATOUS POLYPOSIS (FAP)

- From a family with a known APC gene mutation
- Personal history of 20 or more adenomas
- Consider testing if a personal history of:
 - Desmoid tumor
 - Hepatoblastoma
 - Cribriform-morular variant of papillary thyroid cancer
 - Multifocal/bilateral CHRPE
 - Between 10-20 adenomas

MUTYH-ASSOCIATED POLYPOSIS (MAP)

- From a family with known MUTYH gene mutation(s)
- Personal history of 20 or more adenomas
- Consider testing if a personal history of:
 - Between 10-20 adenomas
 - At least five serrated polyps (including hyperplastic polyps, sessile serrated adenomas/polyps, and traditional serrated adenomas) with at least some adenomas present
 - Twenty or more serrated polyps of any size, but distributed throughout the colon with at least some adenomas present