

Surveillance Intervals

For Individuals With Average Baseline Risk Following Colonoscopy

Number of Polyps	Size	Histology	Years	Surveillance Method	
No Polyps	o Polyps		10	Any average risk	
≥1	<10 mm	Hyperplastic Rectosigmoid	10	population screening tool	
1 - 2	<10 mm	Tubular Adenomas	5 - 10		
3 - 10		Tubular Adenomas	3		
>10		Adenomas	1		
≥1	≥10 mm	Tubular Adenomas	3	Colonoscopy	
≥1		Advanced Adenomas (villous)	3		
1		Advanced Adenomas (HGD*)	3		
Sessile Serrated Polyp	<10 mm	No Dysplasia	5		
Sessile Serrated Polyp	≥10 mm	No Dysplasia	3	Colonoscopy	
Sessile Serrated Polyp		With Dysplasia	3		

Other Lesions	Years	Surveillance Method	
Traditional Serrated Adenoma (TSA)	3	Colonoscopy	
Serrated Polyposis Syndrome	1+		

NOTE: These recommendations are based on the performance of a complete, well prepped, high quality examination. If this is not the case or if lesions re very large or removed piecemeal a shorter interval to next colonoscopy may be appropriate.

^{*}Based on the WHO definition of serrated polyposis syndrome, with one of the following criteria: at least five serrated polyps proximal to sigmoid, with two or more ≥10 mm in size; any serrated polyps proximal to sigmoid with family history of serrated polyposis syndrome; and >20 serrated polyps of any size throughout the colon



^{*}HGD = high grade dysplasia