

# Surveillance Intervals

For Individuals With Average Baseline Risk Following Colonoscopy

Number of Polyps	Size	Histology	Years	Surveillance Method
No Polyps			10	Any average risk population screening tool
≥1	<10 mm	Hyperplastic Rectosigmoid	10	
1 - 2	<10 mm	Tubular Adenomas	5 - 10	Colonoscopy
3 - 10		Tubular Adenomas	3	
>10		Adenomas	1	
≥1	≥10 mm	Tubular Adenomas	3	
≥1		Advanced Adenomas (villous)	3	
1		Advanced Adenomas (HGD*)	3	
Sessile Serrated Polyp	<10 mm	No Dysplasia	5	Colonoscopy
Sessile Serrated Polyp	≥10 mm	No Dysplasia	3	
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 are very large or removed piecemeal a shorter interval to next colonoscopy may be appropriate.

\*HGD = high grade dysplasia

\*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