

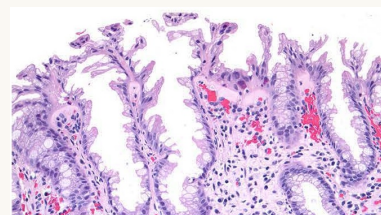
PATIENT INFORMATION

Understanding types of colon polyps

A clearer picture of the findings in your pathology report.

Hyperplastic Polyp

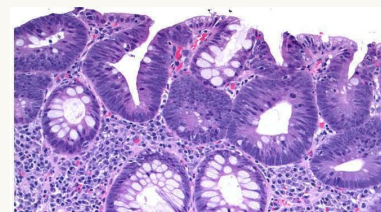
A hyperplastic polyp has no malignant potential and may not require expedited follow-up. An appropriate follow-up interval is determined by your physician.



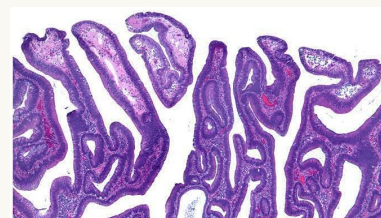
Hyperplastic polyp

Tubular/Villous/Tubulovillous Adenoma

Typically, adenomas are classified as benign tumors. However, tubulovillous adenoma is a type of adenoma that has a high risk of turning cancerous. A tubular adenoma is simply an adenoma that appears as a tube-like structure. A villous adenoma appears in the form of a frilled-like structure, and covers more surface area than a tubular adenoma. A tubulovillous adenoma is a combination of the other two types of adenoma. All three types of these adenomas are dysplastic polyps, meaning that they are at increased risk of developing into cancer. It is likely with any of these polyps that additional follow-up colonoscopies will be necessary. The follow-up interval will depend on the type, size, and number of polyps that your gastroenterologist finds. Adenomas with a villous component have a higher risk of developing into cancer.



Tubular adenoma

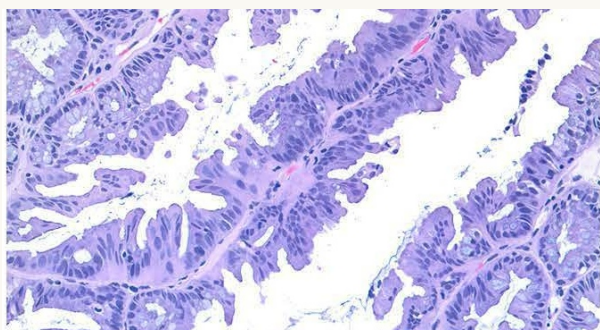


Villous adenoma

PATIENT INFORMATION

Understanding serrated polyps

Histology images and descriptions from the original APS handout.



Traditional Serrated Adenoma

A traditional serrated adenoma is a polyp with a saw tooth-like appearance. These types of polyps are dysplastic and precancerous. They should be removed, and clinical follow-up is necessary. These tend to appear in the distal colon.



Sessile Serrated Polyp

Like the traditional serrated adenoma, these polyps appear saw tooth-like. They tend to appear as slightly flattened, more broadly-based polyps, and are typically found in the proximal colon. These polyps may or may not have dysplasia, but should be removed regardless, and will most likely require follow-up.

Educational wording and histology images retained from the original APS handout. Discuss your findings and follow-up plan with your treating clinician.