# Screening for Testicular Cancer

## Clinical Summary of U.S. Preventive Services Task Force Reaffirmation Recommendation

<table>
<thead>
<tr>
<th>Population</th>
<th>Adolescent and Adult Males</th>
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<tbody>
<tr>
<td><strong>Recommendation</strong></td>
<td>Do Not Screen</td>
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<td>Grade: D</td>
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</tbody>
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## Screening Tests
There is inadequate evidence that screening asymptomatic patients by means of self-examination or clinician examination has greater yield or accuracy for detecting testicular cancer at more curable stages.

## Interventions
Management of testicular cancer consists of orchiectomy and may include other surgery, radiation therapy, or chemotherapy, depending on stage and tumor type. Regardless of disease stage, over 90% of all newly diagnosed cases of testicular cancer will be cured.

## Balance of Harms and Benefits
Screening by self-examination or clinician examination is unlikely to offer meaningful health benefits, given the very low incidence and high cure rate of even advanced testicular cancer.

Potential harms include false-positive results, anxiety, and harms from diagnostic tests or procedures.

## Relevant USPSTF Recommendations
Recommendations on screening for other types of cancer can be found at [http://www.uspreventiveservicestaskforce.org/](http://www.uspreventiveservicestaskforce.org/).

For a summary of the evidence systematically reviewed in making these recommendations, the full recommendation statement, and supporting documents, please go to [http://www.uspreventiveservicestaskforce.org/](http://www.uspreventiveservicestaskforce.org/).