**Abstract**

In 1994 Dr. Bertina et al. discovered Factor Five Leiden, the most common cause of the thrombophilias, occurring in 5% of the Caucasian population. Since then, hundreds of thousands of individuals have experienced venous thromboembolic events and many have died as a consequence of this mutation. Currently global screening for this mutation has not been advocated. A review of the Factor Five Leiden pathophysiology, prevalence, and impact on a variety of common conditions such as oral contraception, pregnancy, and surgery helps establish the case for global screening. In this era of patient-centric medicine, the contention is that patients deserve the right to know their Factor Five Leiden status in order to make informed decisions about not only birth control choices, but also management during high-risk circumstances. This editorial is meant to be thought provoking and hypothesis generating. Should we or should we not screen the public for this common and life-threatening disorder?

**Keywords**

Factor Five Leiden, thrombophilias, oral contraception, pulmonary embolism, deep vein thrombosis, venous thromboembolic disease.