Preventative Health Care Guidelines



TYPE OF EXAM	18-39	40-49	50-64	65+	
Preventive Health Visit	Baseline after age 18, then frequency determined by health status			Annually	
Blood Pressure	Every visit and repeat if elevated (≥140/90)				
Eye Exam			ge 40, then periodic eye 1s as indicated	Every 1-2 years	
Cervical Cancer Screening (Pap)			Age 30-65, Pap alone every 3 years, or Pap with HPV testing every 5 years (preferred)	If indicated	
TESTS					
Diabetes	Screening at least every 3 years if age is greater than 45, BMI (body mass index) is greater than 25, blood pressure (BP) is at or above 140/90 or any other risk factors				
Chlamydia and Gonorrhea Screening	Annually in sexually active females younger than age 25; 25 and older if new partner or other risk factors				
Syphilis Screening	In pregnant women, early in pregnancy; at least annually in adults at increased risk for infection				
Hepatitis C Screening	One-time screening for adults 18-79 years of age, periodic screening in persons who inject drugs (PWID) or if indicated for other risk factors				
HIV Screening	At least once in pregnant women; one-time screening in all adults 15-65; at least annually for males who have sex with males, persons who inject drugs (PWID) or people with other risk factors.			If indicated	
Cholesterol Screening	Screen at age 20 for baseline, then every 4-6 years. Annually if elevated, being treated, or other risk factors.				
Prostate Cancer Screening (PSA)	Not indicated African American men and men with family hi should consider screening at a Average risk men aged 55-69 discuss ri Screening is not recommended in me		should consider screening at age 40 risk men aged 55-69 discuss risks a	-50 nd benefits	
Colorectal Cancer Screening	If indicated			Screening is recommended for people age 45-75; recommended intervals based on type of screening.	
IMAGING					
Abdominal Ultrasound for Abdominal Aortic Aneurysm (AAA)	Not indicated			One-time screening in men aged 65-75 if ever smoked; consider screening for women in this age group if family history of AAA	
Breast Cancer Screening	Discuss with provider			Every 1-2 years for ages 40-74, >74, discuss with provider; women age 40-49 can consider biennial screening	
Bone Density Screening	Not indicated		Postmenopausal women <65 if at increased risk of fracture	Women 65 and older	
Lung Cancer Screening	Not indicated		50-80 with 20 pack-year sm	Discuss annual low-dose CT scan for individuals age 50-80 with 20 pack-year smoking history and current smoker or quit within the past 15 years	
IMMUNIZATIONS					





COUNSELING

Depression Screening	Annually
Tobacco, Drug/Alcohol, Intimate Partner Violence, & Sexual Health Concerns Screening	Annually

INDIVIDUALIZED PREVENTIVE SCREENING RECOMMENDATIONS

For personalized preventive screening recommendations, scan this QR code:





SOURCES:

American Diabetes Association (ADA) – www.diabetes.org American College of Physicians (ACP) – www.acpjournals.org/journal/aim American Congress of Obstetricians and Gynecologists – www.acog.org US Preventive Services Task Force (USPSTF) – www.uspreventiveservicestaskforce.org/uspstf/topic_search_results Recommendations for Periodic Health Exams – www.ahcpr.gov/clinic/uspstfix.htm American Urologic Association (AUA) – www.auanet.org/guidelines