

Preventive Healthcare Guide

Healthy adult preventive healthcare guidelines

Here are suggested guidelines for screenings and checkups for healthy adults. Individuals with a family history of certain diseases and those with lifestyles or other factors that may place them at increased risk, should discuss preventive health measures with their primary care physician. For complete benefit details, refer to your plan's Certificate of Coverage.

TYPE OF SCREENINGS	AGES 18–39	AGES 40–64	AGES 65 and OLDER
Physical exam that includes: Height and weight; health history and identification of risk status; counseling on diet, exercise, substance abuse, injury prevention, tobacco use and dental care	Every one to five years as needed.	Every one to five years as needed.	Once a year.
Blood cholesterol/lipids	For men, every five years beginning at age 35.	For women, every five years beginning at age 45.	Every five years to age 75.
Blood pressure	Every two years.	Every two years.	Once a year.
Fecal occult blood test (a test for blood in your stool) and/or Sigmoidoscopy/Colonoscopy (a test with a lighted instrument that looks in the rectum and lower colon)		For persons age 50 and older, yearly fecal occult blood test and a sigmoidoscopy every four to five years or a colonoscopy every 10 years.	
WOMEN			
Mammogram*		Yearly beginning at age 40.	
Clinical breast exam	Suggested as part of the well-woman exam/ Pap smear.	Once a year.	Once a year.
Breast self-exam	Women regardless of their health may do a monthly breast self-exam.		
Pap smear	Every one to three years depending on previous Pap smear results and any risk factors for cervical cancer.	Every one to three years depending on previous Pap smear results and any risk factors for cervical cancer.	Every one to three years. (May be discontinued at discretion of you and your doctor upon consistently normal results.)
*If a woman has a first generation family history of breast cancer, consult with physician for timing of first baseline Mammogram.			
MEN			
Prostate		Beginning at age 50, even healthy men should discuss screening with their doctor. Prostate specific antigen (PSA) blood test and digital rectal exam (DRE) should be offered annually.	
Testicular self-exam	Men regardless of their health may do a monthly testicular self-exam.		

Source: U.S. Preventive Services Task Force, Centers for Disease Control and Prevention, and American Cancer Society



Preventive Measures for Healthy Adults

	AGES 18–39	AGES 40–64	AGES 65 and OLDER
IMMUNIZATIONS (VACCINES)			
Varicella	Two doses (0, four to eight weeks) for ages 18 and older.		
Flu shot		Once a year, beginning at age 50.	Once a year.
Pneumonia vaccine			Once. ¹
Shingles (Herpes Zoster) vaccine			Once older than 60.
SAFETY AND INJURY PREVENTION	<ul style="list-style-type: none">• Lap/shoulder belts, bicycle/motorcycle or ATV helmets• Smoke detectors, firearms safety, avoid smoking near bedding or upholstery		
SUBSTANCE USE	<ul style="list-style-type: none">• Avoid tobacco use, avoid excessive alcohol, under-age drinking, avoid alcohol during pregnancy and while driving, boating, etc.		
DIET AND EXERCISE	<ul style="list-style-type: none">• Limit fat and cholesterol; maintain caloric balance; emphasize fruits, vegetables, and grains; adequate calcium (women)• Regular physical activity		
SEXUAL PRACTICES	<ul style="list-style-type: none">• Avoid high-risk sexual behavior and risk of sexually transmitted diseases (i.e., abstinence, partner selection, condom use)• If you are sexually active, talk to your doctor about the screening test for chlamydia.		
DENTAL CARE	<ul style="list-style-type: none">• Floss and brush daily with fluoride toothpaste and visit dentist regularly		

¹Unlike the flu shot, the pneumonia shot isn't repeated every year. Most seniors don't need repeat shots. However, if you were younger than 65 when you had the pneumonia vaccine or if you have an ongoing serious illness, check with your doctor. This is true especially if it's been more than five years since you had your shot. Sometimes a "booster" shot may be appropriate.

Pregnant women preventive healthcare guidelines

Recommendations for preventive care for normal or low-risk pregnancies

	FIRST PRENATAL VISIT	FOLLOW-UP VISITS	PRIOR TO DELIVERY
Screening	<ul style="list-style-type: none">• Complications with prior pregnancies• Identify any personal history, family history, or condition you may have that could affect your health or the health of your baby• Tobacco and alcohol use	<ul style="list-style-type: none">• Establish due date	
Testing	<ul style="list-style-type: none">• Blood count• Blood type/Rh factor• Routine screening for hepatitis B, syphilis and Rubella Titer• History of date of last Tetanus injection• Urine test for infection• Consider screen for HIV	<ul style="list-style-type: none">• Screen for diabetes of pregnancy at 24 to 28 weeks	<ul style="list-style-type: none">• A routine test is often performed at 35 to 37 weeks (three to five weeks prior to the expected delivery date) to screen for strep infection in the area of the vagina.
Exam	<ul style="list-style-type: none">• Blood pressure• Weight• General physical exam	<ul style="list-style-type: none">• Blood pressure• Weight• Urine test• Check size of uterus• Listen for baby's heartbeat	
Counseling	<ul style="list-style-type: none">• Nutrition• Tobacco and alcohol• Safety belts• Exercise	<ul style="list-style-type: none">• Nutrition• Safety• Discuss any upcoming tests	<ul style="list-style-type: none">• Breast feeding• Exercise• Delivery options for women with a history of a prior C-section

Early prenatal care is important. Notify your primary care doctor, obstetrician or gynecologist as soon as you think you may be pregnant. If you're planning a pregnancy, ask your doctor how you can take steps to promote a safe pregnancy and a healthy baby. To reduce the risk of spine defects in babies, women who are capable of becoming pregnant should take a daily vitamin that includes 0.4 mg of folic acid.

Source: American College of Obstetrics and Gynecology

Healthy child preventive healthcare guidelines

Periodic health examinations for healthy children should include age-appropriate counseling on diet and exercise, safety and injury prevention and dental health. Adolescents should be counseled regarding high-risk sexual behavior, unintended pregnancy, and substance abuse.

Range of recommended ages

Immunizations	AGE IN MONTHS						AGE IN YEARS				
	Birth	1	2	4	6	12-15	18	19-23	4-6	7-10	11-12
Hepatitis B ¹	HepB			See Footnote ¹	HepB					7-17 HepB series	
Diphtheria, Tetanus, Pertussis			DTaP	DTaP	DTaP	DTaP 4th dose at least 6 months after 3rd dose			DTaP		Tdap (Tetanus booster)
Haemophilus influenzae type b			Hib	Hib	Hib	Hib					
Polio			IPV	IPV	IPV				IPV		
Measles, Mumps, Rubella ²						MMR			MMR		
Varicella (chicken pox)						Varicella			Varicella		
Pneumococcal ³			PCV	PCV	PCV	PCV					
Rotavirus ²			Rota	Rota	Rota						
Influenza (Flu)					Influenza (Yearly) ages 6-59 months						
Hepatitis A					HepA (2 doses)						
Human Papillomavirus ⁴											HPV (3 doses) (Females only)
Meningococcal ⁵											MCV4

¹**At birth:** Administer monovalent HepB to all newborns prior to hospital discharge. If mother is hepatitis B surface antigen (HBsAg)-positive, administer HepB and 0.5 mL of hepatitis B immune globulin (HBIG) within 12 hours of birth. If mother's HBsAg status is unknown, administer HepB within 12 hours of birth. Determine the HBsAg status as soon as possible and if HBsAg-positive, administer HBIG (no later than age 1 week). If mother is HBsAg-negative, the birth dose can be delayed, in rare cases, with a provider's order and a copy of the mother's negative HBsAg laboratory report in the infant's medical record.

⁴**4-month dose:** It is permissible to administer four doses of HepB when combination vaccines are administered after the birth dose. If monovalent HepB is used for doses after the birth dose, a dose at age 4 months isn't needed. Adolescents who haven't already had hepatitis B vaccine should receive them.

²Administer the second dose of MMR at age 4-6 years. MMR may be administered before age 4-6, provided four weeks or more have elapsed since the first dose.

³ New vaccine introduced in early 2000, primarily for children younger than 2.

⁴Minimum age: 9 Administer the HPV vaccine series to females at age 13-18 years if not previously vaccinated.

⁵Administer MCV4 at age 11-12 and at age 13-18 if not previously vaccinated. MPSV4 is an acceptable alternative. Administer MCV4 to previously unvaccinated college freshmen living in dormitories.

Remember to keep a record of all your child's shots.

Source: U.S. Preventive Services Task Force, Centers for Disease Control and Prevention, and American Cancer Society

Note: Immunization recommendations for adults and children may change. For updates or catch-up immunizations and immunizations for high-risk groups check with your doctor or Centers for Disease Control and Prevention at www.cdc.gov/vaccines. Preventive health recommendations are subject to change and these guidelines do not apply to all individuals. There is continuing debate regarding the risks and benefits of certain preventive services. These guidelines were developed using the following sources: the Recommended Immunizations Schedules for Persons Aged 0-18 years are approved by the Advisory Committee on Immunization Practices (www.cdc.gov/vaccines/recs/acip), the American Academy of Pediatrics (<http://www.aap.org>), and the American Academy of Family Physicians (<http://www.aafp.org>).