

# 2011 Preventive Health Guidelines

SCREENINGS:	AGE RANGE						
	20s	30s	40s	50s	60s	70s	80+
Physicals/health assessments	Should be done periodically, frequency to be determined by physician.		Recommended every two years.		Recommended annually.		
Height, weight, and Body Mass Index	Recommended every two years.						
Total blood cholesterol	Men: Ages 20-35 if at risk.		Men ages 35 and older: Frequency to be determined by physician.				
	Women: Ages 20-45 if at risk.			Women ages 45 and older: Frequency to be determined by physician.			
Blood pressure screening	Should be done periodically, frequency to be determined by physician.						
Vision screening	Recommended annually.						
Glaucoma screening	Frequency to be determined by physician.					Ages 67 and older: Recommended every two years.	
Dilated retinal examination	Recommended annually for members with diabetes.						
Screening for hearing impairment						Should be done periodically, frequency to be determined by physician.	
Mammogram	Individual decision of member and physician.		Ages 40 to 75: Recommended every two years.			Individual decision of member and physician.	
Pelvic exam/Pap smear	Should be done periodically, frequency to be determined by physician.						
Chlamydia screening	Sexually active non-pregnant women ages 24 and younger.	Recommended for non-pregnant women who are at an increased risk.					
Fecal occult blood test (FOBT), sigmoidoscopy, double-contrast barium enema, or colonoscopy				Men and women ages 50-75 should follow one of these five screening options: Yearly fecal occult blood test (FOBT) plus flexible sigmoidoscopy every five years; flexible sigmoidoscopy every five years; yearly FOBT; colonoscopy every 10 years; double-contrast barium enema every five years **The combination of FOBT and flexible sigmoidoscopy is preferred over either test alone.			Ages 75 and older if at risk.
Prostate-specific antigen (PSA) screening			Men ages 40-49 if at risk.	Should be done periodically, frequency to be determined by physician.			
Depression and dementia screening					Should be done periodically, frequency to be determined by physician.		
Bone mass measurement	Women ages 60-64: periodically if at high risk for osteoporosis. »				Women ages 65 and older: Periodically. Frequency to be determined by physician.		
Education and counseling:							

All patients should be periodically screened and counseled as appropriate regarding injury prevention, nutrition, adequate calcium intake and osteoporosis, physical activity, obesity, breast and testicular self-exams, dental care, low back pain, sun protection, tobacco usage, alcohol and substance abuse, prescription drug misuse and abuse, signs and symptoms of depression, stroke prevention, and family violence and abuse.

- Not nationally recommended for this age group
- Range of recommended ages
- Recommended for certain high-risk groups
- Frequency determined by physician

\*This schedule lists some of the recommended preventive care guidelines as of August 2011 for adults ages 18 and older. Please visit [www.advantageplan.com](http://www.advantageplan.com) for the complete list of recommendations. ADVANTAGE Health Solutions, Inc. generally adopts the most current recommendations approved by the U.S. Preventive Services Task Force. Additional screenings may be licensed and recommended throughout the year. For more information regarding the preventive guidelines, visit <http://www.uspreventiveservicestaskforce.org/recommendations.htm>.