

## Exams

**22–39 years old:** one exam at least every five years or more frequently at physician's discretion (screen annually if systolic blood pressure is 120 to 139 mm Hg or diastolic is 80 to 90 mm Hg);  
**40+ years old:** annual exam

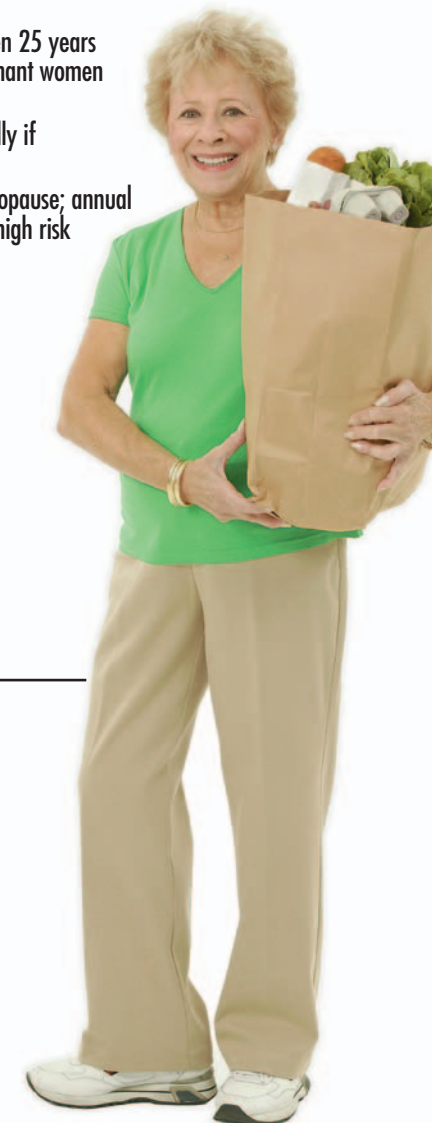
## Routine Screenings/Tests

- **Blood sugar level:** annual screening
- **Breast cancer:** mammogram for females at risk under 35; baseline screening at 35; screening every one to two years for ages 35–39; annually starting at age 40; MRIs for high-risk females
- **Cervical cancer:** screening every two years for women ages 21–30; every three years for women 30 and older with three negative cytology tests (screening not indicated for women who have had a total hysterectomy for benign disease)
- **Colorectal cancer:** screening beginning at age 50; age 45 for African Americans (earlier for high-risk individuals)
  - Colonography: every five years, or
  - Colonoscopy: (preferred) every 10 years, or
  - Flexible sigmoidoscopy: every five years, or
  - Fecal occult blood testing and flexible sigmoidoscopy: every five years, or
  - Double contrast barium enema: every five years, or
  - Fecal occult blood testing: annual screening
- **Digital rectal exam/PSA:** offer annually to African American men or anyone with positive family history of prostate cancer starting at age 40; annually for all men 50 and older
- **Dilated eye exam:** every 10 years until age 40; every two to four years after age 40; annually for diabetics
- **General health screenings:** height and weight; screen for obesity and record Body Mass Index; blood pressure and cancer screenings; pelvic and clinical breast exam for females; clinical testicular exam for males; assess tobacco exposure and use; starting at age 55: hearing screening and counseling; vision screening (Snellen acuity test)
- **Glaucoma screening:** every three to five years from ages 39–50 (or every one to two years if at high risk); every one to two years after age 50
- **Human Papillomavirus (HPV):** screening with Pap smear for women 30 and older at physician's discretion (if negative, repeat every three years)
- **Total blood cholesterol and HDL-C:** every five years (more frequently for adults at high risk)

## Other Recommended Screenings/Tests

*Please review to see if any of the following screenings are applicable for you or your family.*

- **Aortic Abdominal Aneurysm (AAA):** one screening by ultra-sonography for current and former male smokers 65–75 years old
- **Chlamydia:** screening for all sexually active women 25 years old and younger; screening for high-risk, non-pregnant women over 25
- **Diabetes:** screening as clinically indicated, especially if sustained blood pressure is greater than 135/80
- **Endometrial (uterine) cancer:** screening at menopause; annual endometrial biopsy starting at age 35 for those at high risk
- **Hepatitis C and Tuberculosis:** screening for high-risk adults
- **HIV, Gonorrhea and Syphilis:** offer screenings to all adults; strongly recommended for high-risk adults
- **Osteoporosis:** screening every one to two years for women 65 and older, and in younger women who are at high risk for fractures
- **Retinal exam:** for high-risk diabetics
- **Rubella:** screening for susceptibility in all females of childbearing age through age 54



SCREENINGS

- Hepatitis A
- Hepatitis B
- Hib (Haemophilus Influenza)
- Human Papillomavirus quadrivalent (HPV4) or bivalent (HPV2)
- Meningococcal conjugate vaccine (MCV4) or polysaccharide vaccine (MPSV4)
- MMR (Measles, Mumps, Rubella)
- Pneumococcal polysaccharide vaccine
- Seasonal influenza
- Tetanus (Td/Tdap) (Tetanus, Diphtheria, Pertussis)
- Varicella (Chickenpox)
- Zoster (Shingles)

IMMUNIZATIONS

*For detailed, up-to-date immunization schedule information, please view the Centers for Disease Control and Prevention's schedules, which are available at [cdc.gov/vaccines/recs/schedules/adult-schedule.htm](http://cdc.gov/vaccines/recs/schedules/adult-schedule.htm).*

**See next page for important information on counseling**



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## Cancer Prevention

- Breast self-exam instruction for females
- Testicular self-exam instruction for males
- Discuss breast cancer chemoprevention

## Dental Health

- Toothbrushing, flossing and regular dental visits

## Diet and Exercise

- Limit high-fat foods (especially saturated fat)
- Eat more high-fiber, iron-rich (females) and calcium-rich foods
- Limit sodium intake
- Eat more foods high in folic acid (for females of childbearing age)
- Counsel females about maintaining calcium intake to prevent osteoporosis
- Counseling and behavioral interventions to promote sustained weight loss in obese adults
- Participate in routine and frequent physical activity/exercise
- Intensive dietary counseling for adults with high cholesterol or at risk for cardiovascular disease

## Injury Prevention

- Use of safety belts, helmets and protective padding
- Avoid violent behavior
- Smoke detectors
- Safety precautions when using household equipment

## Sexual Practices

- Sexually transmitted diseases, safe sexual practices, unintended pregnancy for females in child-bearing years and periodic counseling about effective contraceptive methods
- Sexual development, behavior and sexuality during the aging process

## Substance Abuse

- Discourage use of alcohol, drugs and tobacco
- Promote cessation of alcohol, drug and tobacco use, if appropriate
- Dangers of driving and other activities while under the influence of alcohol and drugs

## Other

- Aspirin for prevention of cardiovascular disease: for males ages 49–79 and females 55–79 when benefits of treatment outweigh risks
- Breast Cancer/BRCA Mutation Testing: refer women whose family history shows an increased risk of harmful mutations in BRCA 1 and 2 genes for genetic counseling and evaluation
- Dangers of sun exposure
- Screen for depression
- Counsel about domestic violence
- Discuss osteoporosis and cardiovascular disease
- Advance directives and living wills
- Counsel peri/post-menopausal women about the risks and benefits of estrogen replacement
- Peri/menopausal counseling regarding treatment and lifestyle modifications that may be available
- Preconception planning:
  - Encourage development of reproductive health plan and assess desire to have or not have children
  - Women planning or capable of pregnancy should take a daily supplement containing 0.4-0.8 mg of folic acid
  - Consultation and weight-loss counseling for obese women planning to conceive
- Encourage screening for cystic fibrosis carrier status for all couples/females

**See previous page for important information on screenings and immunizations**



Guidelines were created based on information from organizations such as the Centers for Disease Control and Prevention (CDC), the Advisory Committee on Immunization Practices (ACIP), the American Academy of Family Physicians (AAFP) and the American Academy of Pediatrics (AAP).

Screening, immunization and counseling guidelines are recommendations only. Members should follow their providers' medical judgment. Recommendations may not be covered benefits under all BCBSD plans. Please consult your benefits material.

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