

Women's Guidelines for Screenings, Exams and Vaccinations/Immunizations

Health Screenings – Adult Women*

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| Breast Screening | Begin at age 40 for a baseline mammogram, or earlier if family history or risk factors exist |
| Colorectal Screening | <p>No Family History: Primary Recommendation:</p> <ul style="list-style-type: none"> • Colonoscopy every 10 years beginning at age 50 <p>Secondary Recommendation:</p> <ul style="list-style-type: none"> • Annual fecal occult blood test (FOBT) in combination with a flexible sigmoidoscopy every 5 years[†] • Double contrast barium enema (DCBE) in combination with a flexible sigmoidoscopy every 5 year[†] <p>[†]All positive tests should be followed up by a colonoscopy</p> <p>Family History: Colonoscopy beginning at age 40 or 10 years younger than the age of the diagnosed family member (i.e. dad had a diagnosis at age 48, then children/siblings should be screened at age 38).</p> |
| Skin Cancer Screening | Once a year |
| Oral Cancer Screening | Once a year |
| Hypertension Screening (Blood Pressure) | Adults with normal blood pressure (120/80 or lower) should be screened yearly. A blood pressure in the pre-hypertension range (121-139/80-89) should be screened monthly (to watch and see if they go into hypertension), and someone with hypertension and on blood pressure-lowering medications (blood pressure > 140/90) should have their blood pressure monitored daily to weekly to monthly, depending on doctor recommendations. |
| Cholesterol Screening | Adults should be screened every 5 years if their cholesterol is within normal limits. If their cholesterol is high (total cholesterol > 200 mg/dL or HDL < 40 mg/dL), they should be screened every year, or more frequently based upon doctor recommendations. |
| Diabetes Screening | Screening every 3 years starting at the age of 45, if blood sugars have been normal. If considered pre-diabetic, screening should be annually. |
| Osteoporosis Screening | All women ages 65 and older should get a routine bone-density screening. Younger, postmenopausal women who have osteoporosis risk factors should also be screened; risk factors include smoking, drinking excessively, a family history of bone fractures and a thin frame. |
| Vascular Screening | Once every two years beginning at age 50, but every year if there is a family history of stroke or peripheral arterial disease. Doing an ankle-brachial index screening for peripheral arterial disease is usually not recommended unless a person is having symptoms. |
| Body Mass Index (BMI) | Once a year |
| Hearing Screening | Once a year beginning at age 65 |

Doctor Examinations – Adult Women*

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| Dental Exam | One to two times a year |
| Physician Exam | Once a year |
| Rectal Exam | Every five years |
| Vision Exam | Once every two years |
| Pap Smear | Once a year beginning at age 18 |
| Mammogram | Annually after age 40, mammograms at age 35 if family history of breast cancer |
| Clinical Breast Exam | Once a year |

Self Examinations – Adult Women*

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| Breast Exam | Monthly |
| Weight | Monthly |

Vaccinations/Immunizations – Adult Women*

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| Tetanus, Diphtheria, Pertussis (Td/Tdap) | Booster required every 10 years |
| Hepatitis A | Talk to your doctor to see if you are at risk |
| Hepatitis B | Talk to your doctor to see if you are at risk |
| Flu | Once a year |
| Pneumonia | Once after age 65** |
| Shingles | Once after age 60** |
| Meningitis | College freshman living in dormitories |
| Measles, Mumps, and Rubella (MMR) | One or two doses for adults ages 19 - 49 if no evidence of immunity; One dose after age 50** |
| Chicken Pox | Two doses if there is no evidence of immunity** |

*Ages 19 years and older

**Recommendations may vary; discuss the start and frequency of screening with your doctor, especially if you are at risk.



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Men's Guidelines for Screenings, Exams and Vaccinations/Immunizations

Health Screenings – Adult Men*

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| Prostate Screening (PSA Testing and Digital Rectal Exam) | Ages 50 and older, discuss the benefits and risks of screening with your doctor** |
| Colorectal Screening | <p>No Family History: Primary Recommendation:</p> <ul style="list-style-type: none"> Colonoscopy every 10 years beginning at age 50 <p>Secondary Recommendation:</p> <ul style="list-style-type: none"> Annual fecal occult blood test (FOBT) in combination with a flexible sigmoidoscopy every 5 years[†] Double contrast barium enema (DCBE) in combination with a flexible sigmoidoscopy every 5 year[†] <p>[†]All positive tests should be followed up by a colonoscopy</p> <p>Family History: Colonoscopy beginning at age 40 or 10 years younger than the age of the diagnosed family member (i.e. dad had a diagnosis at age 48, then children/siblings should be screened at age 38).</p> |
| Skin Cancer Screening | Once a year |
| Oral Cancer Screening | Once a year |
| Hypertension Screening (Blood Pressure) | Adults with normal blood pressure (120/80 or lower) should be screened yearly. A blood pressure in the pre-hypertension range (121-139/80-89) should be screened monthly (to watch and see if they go into hypertension), and someone with hypertension and on blood pressure-lowering medications (blood pressure > 140/90) should have their blood pressure monitored daily to weekly to monthly, depending on doctor recommendations. |
| Cholesterol Screening | Adults should be screened every 5 years if their cholesterol is within normal limits. If their cholesterol is high (total cholesterol > 200 mg/dL or HDL < 40 mg/dL), they should be screened every year, or more frequently based upon doctor recommendations. |
| Diabetes Screening | Screening every 3 years starting at the age of 45, if blood sugars have been normal. If considered pre-diabetic, screening should be annually. |
| Osteoporosis Screening | Routine bone-density screening for men over age 70. Talk to your doctor to see if you are at risk. |
| Vascular Screening | Once every two years beginning at age 50, but every year if there is a family history of stroke or peripheral arterial disease. Doing an ankle-brachial index screening for peripheral arterial disease is usually not recommended unless a person is having symptoms. |
| Body Mass Index (BMI) | Once a year |
| Hearing Screening | Once a year beginning at age 65 |

Doctor Examinations – Adult Men*

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|----------------|-------------------------|
| Dental Exam | One to two times a year |
| Physician Exam | Once a year |
| Rectal Exam | Every five years |
| Vision Exam | Once every two years |

Self Examinations – Adult Men*

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|-----------------|---------|
| Testicular Exam | Monthly |
|-----------------|---------|

Vaccinations/Immunizations – Adult Men*

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|--|--|
| Tetanus, Diphtheria, Pertussis (Td/Tdap) | Booster required every 10 years |
| Hepatitis A | Talk to your doctor to see if you are at risk |
| Hepatitis B | Talk to your doctor to see if you are at risk |
| Flu | Once a year |
| Pneumonia | Once after age 65** |
| Shingles | Once after age 60** |
| Meningitis | College freshman living in dormitories |
| Measles, Mumps, and Rubella (MMR) | One or two doses for adults ages 19 - 49 if no evidence of immunity; One dose after age 50** |
| Chicken Pox | Two doses if there is no evidence of immunity** |

*Ages 19 years and older

**Recommendations may vary; discuss the start and frequency of screening with your doctor, especially if you are at risk.

