

# Preventive Health Guidelines for Women

Periodic Health Evaluation	19-39 years	40-49 years	50-64 years	65+ years
<b>Complete History and Physical Examination</b>	Complete history and physical at discretion of practitioner and patient: <ul style="list-style-type: none"> <li>▪ Blood pressure – at least every 1-2 years</li> <li>▪ Height, weight, body mass index</li> <li>▪ Oral cavity</li> <li>▪ Skin</li> <li>▪ Hearing screening</li> <li>▪ Vision screening</li> <li>▪ Breast exam</li> <li>▪ Pelvic/rectal exam</li> </ul>			
<b>Counseling/Education/Health Guidance Topics</b>	Age appropriate counseling should be discussed; additional screening and intervention may be necessary for individuals at high-risk: <ul style="list-style-type: none"> <li>▪ Cancer self exams- breast, oral, skin</li> <li>▪ Dental health</li> <li>▪ Injury prevention- safety belts and helmets, occupational hazards, recreational hazards</li> <li>▪ Nutrition/diet</li> <li>▪ Physical activity/exercise</li> <li>▪ Psychosocial evaluation- abuse, violence, depression</li> <li>▪ Living will/ medical power of attorney</li> <li>▪ Sexual practices - family planning, preconception care, contraceptive options, sexually transmitted infections, sexual function</li> <li>▪ Substance use - alcohol, tobacco, drugs</li> </ul>			
<b>Breast Cancer Screening</b>	Clinical breast examination (CBE) every 3 years	CBE every year Screening mammograms every 1-2 years	CBE every year Screening mammograms every year	
<b>Cervical Cancer Screening</b>	Cervical cytology beginning annually no later than age 21 years; Every 2-3 years after 3 consecutive negative results if age $\geq 30$ years with no history of cervical intraepithelial neoplasia 2 or 3, immunosuppression, HIV infection, or DES exposure in utero <i>or</i> Every 3 years with HPV DNA testing if age $\geq 30$ and none of the above factors are present			
<b>Cholesterol Screening</b>		Fasting lipid profile beginning at age 20; if normal, repeat every 5 years		
<b>Colon Cancer Screening</b>			Yearly patient collected fecal occult blood testing (FOBT) or fecal immunochemical testing (FIT) <i>or</i> Flexible sigmoidoscopy every 5 years <i>or</i> Yearly patient collected FOBT or FIT plus flexible sigmoidoscopy every 5 years <i>or</i> Double contrast barium enema every 5 years <i>or</i> Colonoscopy every 10 year <i>or</i> Computed tomography colonography (CTC) every 5 years <i>or</i> Stool DNA test, interval uncertain	
<b>Diabetes</b>		Fasting blood sugar beginning at age 45; if normal, repeat every 3 years*		
<b>Osteoporosis Screening</b>				Bone density screening; begin earlier for postmenopausal women with risk factors for fracture or women with a history of fragility fractures
<b>Sexually Transmitted Infections</b>	Chlamydia testing if age $\leq 25$ and sexually active; screen women $> 25$ with risk factors, such as new sex partner, multiple partners, history of STI Routine HIV testing for all patients; high-risk women should be tested at least annually			
<b>Thyroid Screening</b>			Thyroid stimulating hormone beginning at age 35; if normal, repeat every 5 years*	
<b>Immunizations</b>	See immunization guidelines			

\*Screening should begin earlier if patient has high-risk factors.

Sources: *United States preventive Services Task Force (USPSTF)*  
*American College of Obstetrics and Gynecology (ACOG)*  
*American Diabetes Association (ADA)*  
*American Cancer Society (ACS)*

*American Academy of Family Physicians (AAFP)*  
*American Thyroid Association*  
*American College of Physicians (ACP)*  
*Centers for Disease Control (CDC)*