

These preventative screening guidelines may vary based on patient’s medical history, family history, and other associated risk factors.

## Female

PREVENTATIVE SERVICE	TEST	FREQUENCY	DATE LAST DONE	NEXT DUE DATE
COLORECTAL CANCER SCREENINGS	Stool Tests	Ages 50-75: Once a year		
	Flexible Sigmoidoscopy	Ages 50-75: Every 5 years or every 10 years with annual stool tests		
	Colonoscopy	Ages 50-75: Every 10 years		
	CT Colonography	Ages 50-75: Every 5 years		
BREAST CANCER SCREENINGS	Mammogram	Ages 50-74: Every year		
	Breast MRI	Used along with mammograms in high risk patients		
	Breast Exam	Monthly self-breast exam		
CERVICAL CANCER SCREENINGS	Pap test/smear	Ages 21-65: Every 3 years		
	HPV co-test	Ages 30-65: Every 5 years		
CARDIOVASCULAR SCREENINGS	Lipid Panel – Blood Work	Ages 45+: Every 5 years		
	Blood Pressure	Each regular office visit or at least every 2 years if BP is less than 120/80		
	Weight/Body Mass Index (BMI)	During annual physical exam		
ABDOMINAL AORTIC ANEURYSM SCREENING	AAA Ultrasound	Not recommended for preventative health		
DIABETES SCREENING	Fasting Blood Sugar or A1C	Ages 40-75 with normal risk: Every 3 years		
DIABETES SELF-MANAGEMENT				
VISION/GLAUCOMA SCREENING	Ask your eye doctor			
BONE MASS MEASUREMENT	Dexa Bone Scan	Ages 65+: Every 2 years		
NUTRITION SERVICES				
IMMUNIZATIONS	Link to Immunizations per age group in <a href="https://www.healthcare.gov/preventive-care-children/">https://www.healthcare.gov/preventive-care-children/</a>			
LUNG CANCER SCREENING	Chest CT	Ages 55-80 with smoking history: Every year		
SMOKING CESSATION				
ADVANCED DIRECTIVE		All Ages: Give copy to your provider and Update as needed		
OTHER SCREENING	Skin Cancer	Ages 20-39: Every 3 years Ages 40+: Every year		
TYPE OF EXAM				