

### **General screening guidelines**

Heart disease and cancer are the two leading causes of death in the United States, and the risks of developing a significant health condition rise significantly with age.

Your family health history can also make you predisposed to certain diseases. So it's important to understand your risk factors and receive appropriate screenings to head off potential problems when they are most treatable. Early detection could save your life.

Recommended tests are based on your age, gender and overall risk factors. The guidelines here are a general reference only. Always discuss your particular health care needs with your physician.

# Tests for women



# Age range Mammogram\*

Cervical cancer (Pelvic exam/Pap smear)

Bone mineral density (osteoporosis)

**Blood pressure** 

Cholesterol

Obesity/BMI Diabetes

(fasting plasma glucose test recommended)

Colorectal cancer

18-39	40-49	50-64	65 +			
	Discuss with your doctor or nurse	Every two years through age 74; talk to your health care provider about need for screening after age 74				
At least every three years after age 21 or if you have been sexually active for three years	• At least ever	y three years	Ask your health care provider if you need testing			
		Ask your health care provider if you are at risk for osteoporosis	Receive test after age 65; talk to your health care provider about repeat testing			
At least every two years; or annually if your blood pressure is higher than 120/80						
	Regular :	screenings 40-75 years. Ask yo rovider for recommended frec	ur health			
Regular screenings; a BMI	of 25 to 29.9 is considered ove	erweight, and a BMI of 30 and	above is considered obese			
Screening for pre-di	iabetes and type 2 diabetes fo obese with no sym	r adults ages 35 to 70 years wh optoms of diabetes	no are overweight or			
	•		gmoidoscopy, or colonoscopy d continuing until age 75			

<sup>\*</sup>The U.S. Preventive Services Task Force (USPSTF) concludes that the current evidence is insufficient to assess the additional benefits and harms of clinical breast examination (CBE) beyond screening mammography in women age 40 and older.



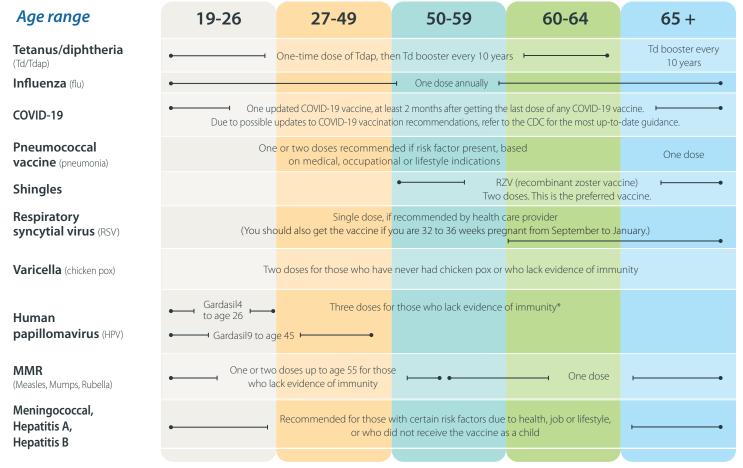
# for men

**Tests** 

Age range	18-39	40-49	50-64	65 +
Blood pressure	At least ev	very two years; or annually if yo	our blood pressure is higher th	an 120/80
Cholesterol		Regular care p	screenings 40-75 years. Ask yo rovider for recommended frec	ur health quency
Obesity/BMI	Regular screenings; a BMI	of 25 to 29.9 is considered ove	erweight, and a BMI of 30 and	above is considered obese
<b>Diabetes</b> (fasting plasma glucose test recommended)	Screening for pre-di		r adults ages 35 to 70 years wh nptoms of diabetes	no are overweight or
Colorectal cancer		•——	Fecal occult blood testing, sign beginning at age 45 and	gmoidoscopy, or colonoscopy d continuing until age 75
Prostate cancer				about the risks and screening*

## **Immunization guidelines**

Vaccinations work to help your body learn to fight off disease and build immunity to future exposure. Traditional vaccines mimic a natural infection by introducing dead or weakened versions of the germs that trigger a specific illness. Your immune system can clear these germs from your body without experiencing common symptoms and complications, and it will "remember" how to protect your body from germs it has encountered before. For additional information on immunizations, visit **cdc.gov/vaccines**.



<sup>\*</sup> The U.S. Preventive Services Task Force (USPSTF) concludes that the current evidence is insufficient to assess the balance of benefits and harms of prostate cancer screening in men younger than age 75. Given the uncertainties and controversy surrounding prostate cancer screening in men younger than 75, a clinician should not order the PSA test without first discussing with the patient.