



PREVENTIVE SCREENING GUIDE FOR PROVIDERS

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SCREENING	AGE AND GENDER	FREQUENCY	BENEFIT	ADDITIONAL INFORMATION
Cervical Cancer	Women ages 21-64	Once every 3 years or every 5 years if done with HPV test	Catches cervical cancer very early	Screening is every three years with PAP, or for those 30-65 years who want to lengthen screening, can screen with PAP and HPV every 5 years.
Breast Cancer	Women ages 50-74	Once every 2 years	Quick, easy, and safe way to detect breast cancer	Women over the age 40 should be routinely given the opportunity to receive information about breast cancer screening and informed decision-making.
Colon Cancer	All adults ages 50-75	Screening for colon cancer should start at age 50 years and continue until age 75 years.		
Cholesterol	Men ages 35 and older, men 20 to 35 if at increased risk; women ages 45 and older if at increased risk for coronary artery disease	About every 5 years, depending on individual cholesterol levels and risk factors	Lipid-lowering therapy substantially decreases the incidence of coronary artery disease in persons with abnormal lipids	Risk factors include: diabetes, tobacco use, hypertension, obesity, personal history of atherosclerosis, family history of cardiovascular disease.
Blood Pressure	All adults ages 18 and older	Every 2 years for <120/80 mm Hg; yearly if 120-139/80-90 mm Hg	Detection and treatment of hypertension decreases risk of cardiovascular events	Screening every 2 years in persons with blood pressure less than 120/80 mm Hg and every year in persons with systolic blood pressure of 120 to 139 mm Hg or diastolic blood pressure of 80 to 90 mm Hg.
Body Mass Index	All adults	Every year	Behavioral interventions for those with BMI >30 can lead to weight loss and reduced risk for coronary heart disease, type 2 diabetes, and disability.	BMI=wt/ht ² x703 Ht=inches Normal BMI=20-25

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Impact the health of your patients by reminding them to schedule routine health screenings and exams using the reference guide below. Also, senior patients can benefit from additional wellness reminders for exercise, mental health screening and risk factors for falling. Encourage patients to follow up with their primary care provider and get up to date on the following screenings:

SCREENING	AGE AND GENDER	FREQUENCY	BENEFIT	ADDITIONAL INFORMATION
Prostate Cancer	Adult men	Should not be automatically ordered or performed without the opportunity to have shared-decision making		
Osteoporosis	Women over 65 Also recommend screening in younger women at increased risk	Normal BMD T-score=1 or higher, retest in 15 years Mild Osteopenia T-score=1.01-1.49; retest 15 years Moderate Osteopenia T-score=1.5-1.99, retest 5 years Advanced Osteopenia T-score=2.0-2.49, retest every year	Assess fracture risk in postmenopausal women	Dual-energy x-ray absorptiometry (DXA) of the hip and lumbar spine. Uncertain, evidence that most women over 67 years with normal or only mildly osteopenic bone density on DXA may reasonably wait 10-15 years before repeat testing.
Depression	Adults	Talk with your doctor	PH2 and PH9 screenings help identify those who would benefit from additional support and treatment	Refer patients to primary care when PH9 is positive.

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Care for Senior patients, over 65 years of age

As we reach the “silver tsunami” of baby boomers entering their senior years, many of your patients will benefit from some additional attention. Here are some tips for helping your patients aged 65 and older maintain their well-being and safety well into their golden years.



Improving or Maintaining Physical Health

- Encourage patients to increase overall physical activity.
- Ask patients the following questions:
 - Are you limited in your work or daily activities (vacuuming, golf, climbing stairs)?
 - Has pain interfered with your work or daily activities?
 - If yes, recommend appropriate care.



Improving or Maintaining Mental Health

- Ask patients if emotional problems (depression, anxiety) have interfered with work, daily, or social activities. If yes, recommend ways patients can improve their overall mental health.
- Make an appropriate mental health referral as needed.



Improving Bladder Control

- Ask patients if they have experienced any leakage of urine or urinary incontinence.
- If yes, recommend ways to control or manage urinary incontinence with:
 - Bladder training, exercises, medication, or surgery.
 - Make a referral if indicated.



Monitoring Physical Activity

- Ask patients about their level of physical activity and if they exercise regularly.
- Encourage patients to start, increase or maintain their level of exercise or physical activity; some suggestions may include:
 - Start taking stairs, increase walking to 20 min/day, join a Silver Sneakers program



Reducing Risk of Falling

- Ask patients if they have fallen or have problems with balance or walking.
- Discuss with patients ways in which they can help prevent falls or treat balance problems; some suggestions may include:
 - Use a cane or walker
 - Check your blood pressure lying and standing
 - Do an exercise or physical therapy program
 - Receive a vision or hearing test