

Appendix G: Summary of the U.S. Preventive Services Task Force% (USPSTF) Recommendations for Services To Be Included in Periodic Health Examinations, by Age Group

The preventive services recommended by the USPSTF for inclusion in periodic health examinations are summarized in this appendix in eight tables, organized by age group. The preventive services listed reflect only those topics evaluated by the Task Force. The USPSTF specifically noted that clinicians should use individual judgment to determine what is most appropriate for each patient. The U.S. Preventive Services Task Force report, *Guide to Clinical Preventive Services*, gives more detailed information on the proper indications for specific preventive services than that provided in the tables (224).

Table G-I—Birth to 18 Months (Schedule: 2,4, 6, 15, 18 Months^a)

Screening	Parent counseling	Immunization and chemoprophylaxis	High-risk categories
Height and weight Hemoglobin and hematocrit High-risk groups Hearing ^g (HR1) Erythrocyte protoporphyrin (HR2)	Diet Breastfeeding Nutrient intake, especially iron-rich foods Injury prevention Child safety seats Smoke detector Hot water heater temperature Stairway gates, window guards, pool fence Storage of drugs and toxic chemicals Syrup of ipecac, poison control telephone number Dental health Baby bottle tooth decay Other primary preventive measures Effects of passive smoking	Diphtheria-tetanus-pertussis (DTP) vaccine ^d Oral poliovirus vaccine (OPV) ^e Measles-mumps-rubella (MMR) vaccine ^f Haemophilus influenzae type b (Hib) conjugate vaccine ^g High-risk groups Fluoride supplements (HR3) First week Ophthalmic antibiotics Hemoglobin electrophoresis (HR4) T4/TSH ^h Phenylalanine ⁱ Hearing (HR1)	HR1 Infants with a family history of childhood hearing impairment or a personal history of congenital perinatal infection with herpes, syphilis, rubella, cytomegalovirus, or toxoplasmosis; malformations involving the head or neck (e.g., dysmorphic and syndromal abnormalities, cleft palate, abnormal pinna); birthweight below 1500 g; bacterial meningitis; hyperbilirubinemia requiring exchange transfusion; or severe perinatal asphyxia (Apgar scores of 0-3, absence of spontaneous respirations for 10 minutes, or hypotonia at 2 hours of age). HR2 Infants who live in or frequently visit housing built before 1950 that is dilapidated or undergoing renovation; who come into contact with other children with known lead toxicity; who live near lead processing plants or whose parents or household members work in a lead-related occupation; or who live near busy highways or hazardous waste sites. HR3 Infants living in areas with inadequate water fluoridation (less than 0.7 parts per million). HR4 Newborns of Caribbean, Latin American, Asian, Mediterranean, or African descent.
<p>This list of preventive services is not exhaustive. It reflects only those topics reviewed by the U.S. Preventive Services Task Force. Clinicians may wish to add other preventive services after considering the patient's individual circumstances.</p>		Remain alert for: Ocular misalignment Tooth decay Signs of child abuse or neglect	

^aFive visits are required for immunizations. Because of lack of data and differing patient risk profiles, the scheduling of additional visits and the frequency of the individual preventive services listed in this table are left to clinical discretion (except as indicated in other footnotes):

^bOnce during infancy.

^cAt age 18-month visit, if not tested earlier.

^dAt ages 2, 4, 6, and 15 months.

^eAt ages 2, 4, and 15 months.

^fAt age 15 months.

^gAt age 18 months.

^hAt birth.

ⁱDays 3 to 6 preferred for testing.

SOURCE: U.S. Preventive Services Task Force, *Guide to Clinical Preventive Services* (Baltimore, MD: Williams and Wilkins, 1989).

Table G-2—Ages 2-6^a

Screening	Patient and parent counseling	Immunizations and chemoprophylaxis	High-risk categories
Height and weight Blood pressure Eye exam for amblyopia and strabismus Urinalysis for bacteriuria <i>High-risk groups</i> Erythrocyte protoporphyria (HR1) Tuberculin skin test (HR2) Hearing ^c (HR3)	<p>Diet and exercise Sweets and between-meal snacks, iron-enriched foods, sodium Caloric balance Selection of exercise program</p> <p>Injury prevention Safety belts Smoke detector Hot water heater temperature Window guards and pool fence Bicycle safety helmets Storage of drugs, toxic chemicals, matches, and firearms Syrup of ipecac, poison control telephone number</p> <p>Dental health Tooth brushing and dental visits</p> <p>Other primary preventive measures Effects of passive smoking <i>High-risk groups</i> Skin protection from ultraviolet light (HR4)</p>	Diphtheria-tetanus-pertussis (DTP) vaccine ^e Oral poliovirus vaccine (OPV) ^f <i>High-risk groups</i> Fluoride supplements (HR5)	HR1 Children who live in or frequently visit housing built before 1950 that is dilapidated or undergoing renovation; who come in contact with other children with known lead toxicity; who live near lead processing plants or whose parents or household members work in a lead-related occupation; or who live near busy highways or hazardous waste sites. HR2 Household members of persons with tuberculosis or others at risk for close contact with the disease; recent immigrants or refugees from countries in which tuberculosis is common (e.g., Asia, Africa, Central and South America, Pacific Islands); family members of migrant workers; residents of homeless shelters; or persons with certain underlying medical disorders. HR3 Children with a family history of childhood hearing impairment or a personal history of congenital perinatal infection with herpes, syphilis, rubella cytomegalovirus, or toxoplasmosis; malformations involving the head or neck (e.g., dysmorphic and syndromal abnormalities, cleft palate, abnormal pinna); birthweight below 1500 g; bacterial meningitis; hyperbilirubinemia requiring exchange transfusion; or severe perinatal asphyxia (Apgar scores of 0-3, absence of spontaneous respirations for 10 minutes, or hypotonia at 2 hours of age). HR4 Children with increased exposure to sunlight. HR5 Children living in areas with inadequate water fluoridation (less than 0.7 parts per million).
<p>This list of preventive services is not exhaustive. It reflects only those topics reviewed by the U.S. Preventive Services Task Force. Clinicians may wish to add other preventive services after considering the patient's medical history and other individual circumstances.</p>		<p>Remain alert for: Vision disorders Dental decay, malalignment, premature loss of teeth, mouth breathing Signs of child abuse or neglect Abnormal bereavement</p>	

^aOne visit is required for immunizations. Because of lack of data and differing patient risk profiles, the scheduling of additional visits and the frequency of the individual preventive services listed in this table are left to clinical discretion (except as indicated in other footnotes).

^bAges 3-4.

^cAnnually.

^dBefore age 3, if not tested earlier.

^eOnce between ages 4 and 6.

SOURCE: U.S. Preventive Services Task Force, *Guide to Clinical Preventive Services* (Baltimore, MD: Williams and Wilkins, 19S9).

Table G-3—Ages 7-12^a

Screening	Parent and patient counseling	Chemoprophylaxis	High-risk categories
Height and weight Blood pressure <i>High-risk groups</i> Tuberculin skin test (HR1)	<p>Diet and exercise Fat (especially saturated fat), cholesterol, sweets and between-meal snacks, sodium Caloric balance Selection of exercise program</p> <p>Injury prevention Safety belts Smoke detector Storage of firearms, drugs, toxic chemicals, matches Bicycle safety helmets</p> <p>Dental health Regular tooth brushing and dental visits</p> <p>Other primary preventive measures <i>High-risk groups</i> Skin protection from ultraviolet light (HR2)</p>	<p><i>High-risk groups</i> Fluoride supplements (HR3)</p>	HR1 Household members of persons with tuberculosis or others at risk for close contact with the disease; recent immigrants or refugees from countries in which tuberculosis is common (e.g., Asia, Africa, Central and South America, Pacific Islands); family members of migrant workers; residents of homeless shelters; or persons with certain underlying medical disorders. HR2 Children with increased exposure to sunlight. HR3 Children living in areas with inadequate water fluoridation (less than 0.7 parts per million).
<p>This list of preventive services is not exhaustive. It reflects only those topics reviewed by the U.S. Preventive Services Task Force. Clinicians may wish to add other preventive services after considering the patient's medical history and other individual circumstances.</p>		<p>Remain alert for: Vision disorders Diminished hearing Dental decay, malalignment, mouth breathing Signs of child abuse or neglect Abnormal bereavement</p>	

^aBecause of lack of data and differing patient risk profiles, the scheduling of additional visits and the frequency of the individual preventive services listed in this table are left to clinical discretion (except as indicated in other footnotes).

SOURCE: U.S. Preventive Services Task Force, *Guide to Clinical Preventive Services* (Baltimore, MD: Williams and Wilkins, 1989).

Table G-4-Ages 13-18°

Screening	Parent and patient counseling	Immunizations and chemoprophylaxis	High-risk categories
<p>History Dietary intake Physical activity Tobacco/alcohol/drug use Sexual practices</p> <p>Physical exam Height and weight Blood pressure High-risk groups Complete skin exam (HR1) Clinical testicular exam (HR2)</p> <p>Laboratory/diagnostic procedures High-risk groups Rubella antibodies (HR3) VDRL (HR4) Chlamydial testing (HR5) Gonorrhea culture (HR6) Counseling and testing for HIV (HR7) Tuberculin skin test (PPD) (HR8) Hearing (HR9) Papanicolaou smear (HR 10)^b</p>	<p>Diet and exercise Fat (especially saturated fat), cholesterol, sodium, iron,^c calcium^e</p> <p>Caloric balance selection of exercise program</p> <p>Substance use Tobacco: cessation/primary prevention Alcohol and other drugs: cessation/ primary prevention Driving/other dangerous activi- ties while under the influence Treatment for abuse High-risk groups Sharing/using unsterilized needles and syringes (HR12)</p> <p>Sexual practices Sexual development and behavior^d Sexually transmitted diseases: partner selection, condoms Unintended pregnancy and contraceptive options</p> <p>Injury prevention Safety belts Safety helmets Violent behavior^f Firearms^g Smoke detector</p> <p>Dental health Regular tooth brushing, flossing, dental visits</p> <p>Other primary preventive measures High-risk groups Discussion of hemoglobin testing (HR13) Skin protection from ultraviolet light (HR14)</p>	<p>Tetanus/diphtheria (Td) booster^h High-risk groups Fluoride supplements (HR15)</p>	<p>HR1 Persons with increased recreational or occupational exposure to sunlight a family or personal history of skin cancer, or clinical evidence of precursor lesions (e.g., dysplastic nevi, certain congenital nevi). HR2 Males with a history of cryptorchidism, orchiopexy, or testicular atrophy. HR3 Females of childbearing age lacking evidence of immunity. HR4 Persons who engage in sex with multiple partners in areas in which syphilis is prevalent, prostitutes, or contacts of persons with active syphilis. HR5 Persons who attend clinics for sexually transmitted diseases; attend other high-risk health care facilities (e.g. adolescent and family planning clinics); or have other risk factors for chlamydial infection (e.g., multiple sexual partners or a sexual partner with multiple sexual contacts). HR6 Persons with multiple sexual partners or a sexual partner with multiple contacts, sexual contacts of persons with culture-proven gonorrhea or persons with a history of repeated episodes of gonorrhea HR7 Persons seeking treatment for sexually transmitted diseases; homosexual and bisexual men; past or present intravenous (IV) drug users; persons with a history of prostitution or multiple sexual partners; women whose past or present sexual partners were HIV infected, bisexual, or IV drug users; persons with long-term residence or birth in an area with high prevalence of HIV infection; or persons with a history of transfusion between 1978 and 1985. HR8 Household members of persons with tuberculosis or others at risk for close contact with the disease; recent immigrants or refugees from countries in which tuberculosis is common (e.g., Asia, Africa Central and South America Pacific Islands); migrant workers; residents of correctional institutions or homeless shelters; or persons with certain underlying medical disorders. HR9 Persons exposed regularly to excessive noise in recreational or other settings. HR10 Females who are sexually active or (if the sexual history is thought to be unreliable) aged 18 or older. HR11 Recent divorce, separation, unemployment depression, alcohol or other drug abuse, serious medical illnesses, living alone, or recent bereavement. HR12 Intravenous drug users. HR13 Persons of Caribbean, Latin American, Asian, Mediterranean, or African descent HR14 Persons with increased exposure to sunlight.</p>

Table G-4-Ages 13-18a--Continued

Screening	Parent and patient counseling	Immunizations and chemoprophylaxis	Health risk categories
<p>This list of preventive services is not exhaustive. It reflects only those topics reviewed by the U.S. Preventive Services Task Force. Clinicians may wish to add other preventive services after considering the patient's medical history and other individual circumstances.</p>		<p>Remain alert for: Depressive symptoms Suicidal risk factors (HR11) Abnormal bereavement Tooth decay, malalignment, gingivitis Signs of child abuse and neglect</p>	<p>HR15 Persons living in areas with inadequate water fluoridation (less than 0.7 parts per million).</p>

^aOne visit is required for immunization. Because of lack of data and differing patient risk profiles, the scheduling of additional visits and the frequency of the individual preventive services listed in this table are left to clinical discretion (except as indicated in other footnotes).

^bEvery 1-3 years.

^cFor females.

^dOften best performed early in adolescence and with the involvement of parents.

^eFor males.

^fOnce between ages 14 and 16.

SOURCE: U.S. Preventive services Task Force, *Guide to Clinical Preventive Services (Baltimore, MD: Williams and Wilkins, 1989)*.

Table G-5-Ages 19-39 (Schedule: Every 1-3 Years^a)

Screening	Counseling	Immunizations	High-risk categories
<p>History Dietary intake Physical activity Tobacco/alcohol/drug use Sexual practices</p> <p>Physical exam Height and weight Blood pressure</p> <p>High-risk groups Complete oral cavity exam (HR1) Palpation for thyroid nodules (HR2) Clinical breast exam (HR3) Clinical testicular exam (HR4) Complete skin exam (HR5)</p> <p>Laboratory/diagnostic procedures Nonfasting total blood cholesterol Papanicolaou smear</p> <p>High-risk groups Fasting plasma glucose (HR6) Rubella antibodies (HR7) VDRL (HR8) Urinalysis for bacteriuria (HR9) Chlamydial testing (HR10) Gonorrhea culture (HR11) Counseling and testing for HIV (HR12) Hearing (HR13) Tuberculin skin test (PPD) (HR14) Electrocardiogram (HR15) Mammogram (HR3) Colonoscopy(HR16)</p>	<p>Diet and exercise Fat (especially saturated fat), cholesterol, complex carbohydrates, fiber, sodium, iron, calcium^c</p> <p>Caloric balance Selection of exercise program</p> <p>Substance abuse Tobacco: cessation/primary prevention Alcohol and other drugs: Limiting alcohol consumption Driving/other dangerous activities while under the influence Treatment for abuse</p> <p>High-risk groups Sharing/using unsterilized needles and syringes (HR18)</p> <p>Sexual practices Sexually transmitted diseases: partner selection, condoms, anal intercourse Unintended pregnancy and contraceptive options</p> <p>Injury prevention Safety belts Safety helmets Violent behavior^d Firearms^e Smoke detector Smoking near bedding or upholstery</p> <p>High-risk groups Back-conditioning exercises (HR19) Prevention of childhood injuries (HR20) Falls in the elderly (HR21)</p> <p>Dental health Regular tooth brushing, flossing, dental visits</p>	<p>Tetanus-diphtheria (Td) booster High-risk groups Hepatitis B vaccine (HR24) Pneumococcal vaccine (HR25) Influenza vaccine^f(HR26) Measles-mumps- rubella vaccine (HR27)</p>	<p>HR1 Persons with exposure to tobacco or excessive amounts of alcohol, or those with suspicious symptoms or lesions detected through self-examination. HR2 Persons with a history of upper-body irradiation. HR3 Women aged 35 and older with a family history of premenopausally diagnosed breast cancer in a first-degree relative. HR4 Men with a history of cryptorchidism, orchiopexy, or testicular atrophy. HR5 Persons with family or personal history of skin cancer, increased occupational or recreational exposure to sunlight, or clinical evidence of precursor lesions (e.g., dysplastic nevi, certain congenital nevi). HR6 The markedly obese, persons with a family history of diabetes, or women with a history of gestational diabetes. HR7 Women lacking evidence of immunity. HR8 Prostitutes, persons who engage in sex with multiple partners in areas in which syphilis is prevalent, or contacts of persons with active syphilis. HR9 Persons with diabetes. HR10 Persons who attend clinics for sexually transmitted diseases; attend other high-risk health care facilities (e.g., adolescent and family planning clinics); or have other risk factors for chlamydial infection (e.g., multiple sexual partners or a sexual partner with multiple sexual contacts, age less than 20). HR11 Prostitutes, persons with multiple sexual partners or a sexual partner with multiple contacts, sexual contacts of persons with culture-proven gonorrhea, or persons with a history of repeated episodes of gonorrhea. HR12 Persons seeking treatment for sexually transmitted diseases; homosexual and bisexual men; past or present intravenous (IV) drug users; persons with a history of prostitution or multiple sexual partners; women whose past or present sexual partners were HIV- infected, bisexual, or IV drug users; persons with long-term residence or birth in an area with high prevalence of HIV infection; or persons with a history of transfusion between 1978 and 1985. HR13 Persons exposed regularly to excessive noise.</p>

Table G-5-Ages 19-39 (Schedule: Every 1-3 Years*)-Continued

Screening	Counseling	Immunizations	High-risk categories
	<p>Other primary preventive measures</p> <p>High-risk groups</p> <p>Discussion of hemoglobin testing (HR22)</p> <p>Skin protection from ultraviolet light (HR23)</p>		<p>HR14 Household members of persons with tuberculosis or others at risk for close contact with the disease (e.g., staff of tuberculosis clinics, shelters for the homeless, nursing homes, substance abuse treatment facilities, dialysis units, correctional institutions); recent immigrants or refugees from countries in which tuberculosis is common; migrant workers; residents of nursing homes, correctional institutions, or homeless shelters; or persons with certain underlying medical disorders (e.g., HIV infection).</p> <p>HR15 Men who would endanger public safety were they to experience sudden cardiac events (e.g., commercial airline pilots).</p> <p>HR16 Persons with a family history of familial polyposis coli or cancer family syndrome.</p> <p>HR17 Recent divorce, separation, unemployment, depression, alcohol or other drug abuse, serious medical illnesses, living alone, or recent bereavement.</p> <p>HR18 Intravenous drug users.</p> <p>HR19 Persons at increased risk for low back injury because of past history, body configuration, or type of activities.</p> <p>HR20 Persons with children in the home or automobile.</p> <p>HR21 Persons with older adults in the home.</p> <p>HR22 Young adults of Caribbean, Latin American, Asian, Mediterranean, or African descent.</p> <p>HR23 Persons with increased exposure to sunlight.</p> <p>HR24 Homosexually active men, intravenous drug users, recipients of some blood products, or persons in health-related jobs with frequent exposure to blood or blood products.</p> <p>HR25 Persons with medical conditions that increase the risk of pneumococcal infection (e.g., chronic cardiac or pulmonary disease, sickle cell disease, nephrotic syndrome, Hodgkin's disease, asplenia, diabetes mellitus, alcoholism, cirrhosis, multiple myeloma, renal disease, or conditions associated with immunosuppression).</p> <p>HR26 Residents of chronic care facilities or persons suffering from chronic cardiopulmonary disorders, metabolic diseases (including diabetes mellitus), hemoglobinopathies, immunosuppression, or renal dysfunction.</p> <p>HR27 Persons born after 1956 who lack evidence of immunity to measles (receipt of live vaccine on or after first birthday, laboratory evidence of immunity, or a history of physician-diagnosed measles.)</p>

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Table G-5-Ages 19-39 (Schedule: Every 1-3 Years^a)-Continued

Screening	Counseling	Immunizations	High-risk categories
<p>This list of preventive services is not exhaustive. It reflects only those topics reviewed by the U.S. Preventive Services Task Force. Clinicians may wish to add other preventive services after considering the patient's medical history and other individual circumstances.</p>		<p>Remain alert for: Depressive symptoms Suicide risk factors (HR17) Abnormal bereavement Malignant skin lesions Tooth decay, gingivitis Signs of physical abuse</p>	

^aThe recommended schedule applies only to the periodic visit itself. The frequency of the individual preventive services listed in this table is left to clinical discretion, except as indicated in other footnotes.

^bEvery 1-3 years.

^cFor women.

^dFor young males.

^eEvery 10 years.

^fAnnually.

SOURCE: U.S. Preventive Services Task Force, *Guide to Clinical Preventive Services* (Baltimore, MD: Williams and Wilkins, 1989).

Table G-6—Ages 40-64 (Schedule: Every 1-3 Years*)

Screening	Counseling	immunizations	High-risk categories
History Dietary intake Physical activity Tobacco/alcohol/drug use Sexual practices Physical exam Height and weight Blood pressure Clinical breast exam ^b High-risk groups Complete skin exam (HR1) Complete oral cavity exam (HR2) Palpation for thyroid nodules (HR3) Auscultation for carotid bruits (HR4) Laboratory/diagnostic procedures Nonfasting total blood cholesterol Papanicolaou smear ^c Mammogram ^d High-risk groups Fasting plasma glucose (HR5) VDRL (HR6) Urinalysis for bacteriuria (HR7) Chlamydial testing (HR8) Gonorrhea culture (HR9) Counseling and testing for HIV (HR10) Tuberculin skin test (PPD) (HR11) Hearing (HR12) Electrocardiogram (HR13) Fecal occult blood/Sigmoidoscopy (HR14) Fecal occult blood/Colonoscopy (HR15) Bone mineral content (HR16)	Diet and exercise Fat (especially saturated fat), cholesterol, complex carbohydrates, fiber, sodium, calcium ^e Caloric balance Selection of exercise program Substance use Tobacco cessation Alcohol and other drugs: Limiting alcohol consumption Driving/other dangerous activities while under the influence Treatment for abuse High-risk groups Sharing/using unsterilized needles and syringes (HR19) Sexual practices Sexually transmitted diseases: partner selection, condoms, anal intercourse Unintended pregnancy and contraceptive options Injury prevention Safety belts Safety helmets Smoke detector Smoking near bedding or upholstery High-risk groups Back-conditioning exercises (HR20) Prevention of childhood injuries (HR21) Falls in the elderly (HR22) Dental health Regular tooth brushing, flossing, and dental visits	Tetanus-diphtheria (Td) booster High-risk groups Hepatitis B vaccine (HR26) Pneumococcal influenza vaccine (HR27) influenza vaccine (HR28)	HR1 Persons with a family or personal history of skin cancer, increased occupational or recreational exposure to sunlight, or clinical evidence of precursor lesions (e.g., dysplastic nevi, certain congenital nevi). HR2 Persons with exposure to tobacco or excessive amounts of alcohol, or those with suspicious symptoms or lesions detected through self-examination. HR3 Persons with a history of upper-body irradiation. HR4 Persons with risk factors for cerebrovascular or cardiovascular disease (e.g., hypertension, smoking, CAD, atrial fibrillation, diabetes) or those with necrologic symptoms (e.g., transient ischemic attacks) or a history of cerebrovascular disease. HR5 The markedly obese, persons with a family history of diabetes, or women with a history of gestational diabetes. HR6 Prostitutes, persons who engage in sex with multiple partners in areas in which syphilis is prevalent, or contacts of persons with active syphilis. HR7 Persons with diabetes. HR8 Persons who attend clinics for sexually transmitted diseases, attend other high-risk health care facilities (e.g., adolescent and family planning clinics), or have other risk factors for chlamydial infection (e.g., multiple sexual partners or a sexual partner with multiple sexual contacts). HR9 Prostitutes, persons with multiple sexual partners or a sexual partner with multiple contacts, sexual contacts of persons with culture-proven gonorrhea, or persons with a history of repeated episodes of gonorrhea. HR10 Persons seeking treatment for sexually transmitted diseases; homosexual and bisexual men; past or present intravenous (IV) drug users; persons with a history of prostitution or multiple sexual partners; women whose past or present sexual partners were HIV infected, bisexual, or IV drug users; persons with long-term residence or birth in an area with a high prevalence of HIV infection; or persons with a history of transfusion between 1978 and 1985.

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Table G-6-Ages 40-64 (Schedule: Every 1-3 Years)-Continued

Screening	Counseling	Immunizations	High-risk categories
	<p>Other primary preventive measures High-risk groups Skin protection from ultraviolet light (HR23) Discussion of aspirin therapy (HR24) Discussion of estrogen replacement therapy (HR25)</p>		<p>HR11 Household members of persons with tuberculosis or others at risk for close contact with the disease (e.g., staff of tuberculosis clinics, shelters for the homeless, nursing homes, substance abuse treatment facilities, dialysis units, correctional institutions); recent immigrants or refugees from countries in which tuberculosis is common (e.g., Asia, Africa, Central and South America, Pacific Islands); migrant workers; residents of nursing homes, correctional institutions, or homeless shelters; or persons with certain underlying medical disorders (e.g., HIV infection).</p> <p>HR12 Persons exposed regularly to excessive noise.</p> <p>HR13 Men with two or more cardiac risk factors (high blood cholesterol, hypertension, cigarette smoking, diabetes mellitus, family history of CAD); men who would endanger public safety were they to experience sudden cardiac events (e.g., commercial airline pilots); or sedentary or high-risk males planning to begin a vigorous exercise program.</p> <p>HR14 Persons aged 50 and older who have first-degree relatives with colorectal cancer; a personal history of endometrial, ovarian, or breast cancer; or a previous diagnosis of inflammatory bowel disease, adenomatous polyps, or colorectal cancer.</p> <p>HR15 Persons with a family history of familial polyposis coli or cancer family syndrome.</p> <p>HR16 Perimenopausal women at increased risk for osteoporosis (e.g., Caucasian race, bilateral oophorectomy before menopause, slender build) and for whom estrogen replacement therapy would otherwise not be recommended.</p> <p>HR17 Recent divorce, separation, unemployment depression, alcohol or other drug abuse, serious medical illnesses, living alone, or recent bereavement.</p> <p>HR18 Persons over age 50, smokers, or persons with diabetes mellitus.</p> <p>HR19 Intravenous drug users.</p> <p>HR20 Persons at increased risk for low back injury because of past history, body configuration, or type of activities.</p> <p>HR21 Persons with children in the home or automobile.</p> <p>HR22 Persons with older adults in the home.</p> <p>HR23 Persons with increased exposure to sunlight.</p> <p>HR24 Men who have risk factors for myocardial infarction (e.g., high blood cholesterol, smoking, diabetes mellitus, family history of early-onset CAD) and who lack a history of gastrointestinal or other bleeding problems, and or her risk factors for bleeding and cerebral hemorrhage.</p>

Table G-6—Ages 40-64 (Schedule: Every 1-3 Years^a)—Continued

Screening	Counseling	Immunizations	High-risk categories
			<p>HR25 Perimenopausal women at risk for osteoporosis (e.g., Caucasian, low bone mineral content, bilateral oophorectomy before menopause or early menopause, slender build) and who are without known contraindications (e.g., history of undiagnosed vaginal bleeding, active liver disease, thromboembolic disorder, hormone-dependent cancer).</p> <p>HR26 Homosexually active men, intravenous drug users, recipients of some blood products, or persons in health-related jobs with frequent exposure to blood or blood products.</p> <p>HR27 Persons with medical conditions that increase the risk of pneumococcal infection (e.g., chronic cardiac or pulmonary disease, sickle cell disease, nephrotic syndrome, Hodgkin's disease, asplenia, diabetes mellitus, alcoholism, cirrhosis, multiple myeloma, renal disease or conditions associated with immunosuppression).</p> <p>HR28 Residents of chronic care facilities and persons suffering from chronic cardiopulmonary disorders, metabolic diseases (including diabetes mellitus), hemoglobinopathies, immunosuppression, or renal dysfunction.</p>
<p>This list of preventive services is not exhaustive. It reflects only those topics reviewed by the U.S. Preventive Services Task Force. Clinicians may wish to add other preventive services after considering the patient's medical history and other individual circumstances.</p>		<p>Remain alert for: Depressive symptoms Suicide risk factors (HR17) Abnormal bereavement Signs of physical abuse or neglect Malignant skin lesions Peripheral arterial disease (HR18) Tooth decay, gingivitis, loose teeth</p>	

^aThe recommended schedule applies only to the periodic visit itself. The frequency of the individual preventive services listed in this table is left to clinical discretion, except as indicated in other footnotes.

^bAnnually for women.

^cEvery 1-3 years for women.

^dEvery 1-2 years for women beginning at age 50.

^eFor women.

^fEvery 10 years.

^gAnnually.

SOURCE: U.S. Preventive Services Task Force, *Guide to Clinical Preventive Services* (Baltimore, MD: Williams and Wilkins, 1989).

Table G-7—Ages 65 and Over (Schedule: Every Year^a)

Screening	Counseling	Immunizations	High-risk categories
History Prior symptoms of transient ischemic attack Dietary intake Physical activity Tobacco/alcohol/drug use Functional status at home Physical exam Height and weight Blood pressure Visual acuity Hearing and hearing aids Clinical breast exam High-risk groups Auscultation for carotid bruits (HR1) Complete skin exam (HR2) Complete oral cavity exam (HR3) Palpation for thyroid nodules (HR4) Laboratory/diagnostic procedures Nonfasting total blood cholesterol Dipstick urinalysis Mammogram ^f Thyroid function tests ^d High-risk groups Fasting plasma glucose (HR5) Tuberculin skin test (PPD) (HR6) Electrocardiogram (HR7) Papanicolaou smear (HR8) Fecal occult blood/Sigmoidoscopy (HR9) Fecal occult blood/bionoscopy (HR10)	Diet and exercise Fat (especially saturated fat), cholesterol, complex carbohydrates, fiber, sodium, calcium Caloric balance Selection of exercise program Substance use Tobacco cessation Alcohol and other drugs: Limiting alcohol consumption Driving/other dangerous activities while under the influence Treatment for abuse Injury prevention Prevention of falls Safety belts Smoke detector Smoking near bedding or upholstery Hot water heater temperature Safety helmets High-risk groups Prevention of childhood injuries (HR12) Dental health Regular dental visits, tooth brushing, flossing Other primary preventive measures Glaucoma testing by eye specialist High-risk groups Discussion of estrogen replacement therapy (HR13) Discussion of aspirin therapy (HR14) Skin protection from ultraviolet light (HR15)	Tetanus+ diphtheria (Td) booster Influenza vaccine ^e Pneumococcal vaccine High-risk groups Hepatitis B vaccine (HR16)	HR1 Persons with risk factors for cerebrovascular or cardiovascular disease (e.g., hypertension, smoking, CAD, atrial fibrillation, diabetes) or those with necrologic symptoms (e.g., transient ischemic attacks) or a history of cerebrovascular disease. HR2 Persons with a family or personal history of skin cancer, or clinical evidence of precursor lesions (e.g., dysplastic nevi, certain congenital nevi), or those with increased occupational or recreational exposure to sunlight. HR3 Persons with exposure to tobacco or excessive amounts of alcohol, or those with suspicious symptoms or lesions detected through self-examination. HR4 Persons with a history of upper-body irradiation. HR5 The markedly obese, persons with a family history of diabetes, or women with a history of gestational diabetes. HR6 Household members of persons with tuberculosis or others at risk for close contact with the disease (e.g., staff of tuberculosis clinics, shelters for the homeless, nursing homes, substance abuse treatment facilities, dialysis units, correctional institutions); recent immigrants or refugees of countries in which tuberculosis is common (e.g., Asia, Africa Central and South America, Pacific islands); migrant workers; residents of nursing homes, correctional institutions, or homeless shelters; or persons with certain underlying medical disorders (e.g., HIV infection). HR7 Men with two or more cardiac risk factors (high blood cholesterol, hypertension, cigarette smoking, diabetes mellitus, family history of CAD); men who would endanger public safety were they to experience sudden cardiac events (e.g., commercial airline pilots); or sedentary or high-risk males planning to begin a vigorous exercise program. HR8 Women who have not had previous documented screening in which smears have been consistently negative. HR9 Persons who have first-degree relatives with colorectal cancer; a personal history of endometrial, ovarian, or breast cancer; or a previous diagnosis of inflammatory bowel disease, adenomatous polyps, or colorectal cancer. HR10 Persons with a family history of familial polyposis coli or cancer family syndrome. HR11 Recent divorce, separation, unemployment, depression, alcohol or other drug abuse, serious medical illnesses, living alone, or recent bereavement.

Table G-7—Ages 65 and Over (Schedule: Every Year)^a—Continued

Screening	Counseling	Immunizations	High-risk categories
<p>This list of preventive services is not exhaustive. It reflects only those topics reviewed by the U.S. Preventive Services Task Force. Clinicians may wish to add other preventive services after considering the patient's medical history and other individual circumstances.</p>		<p>Remain alert for: Depressive symptoms Suicide risk factors (HR11) Abnormal bereavement Changes in cognitive function Medications that increase risk of falls Signs of physical abuse or neglect Malignant skin lesions Peripheral arterial disease Tooth decay, gingivitis, loose teeth</p>	<p>HR12 Persons with children in the home or automobile. HR13 Women at increased risk for osteoporosis (e.g., Caucasian, low bone mineral content, bilateral oophorectomy before menopause or early menopause, slender build) and who are without known contraindications (e.g., history of undiagnosed vaginal bleeding, active liver disease, thromboembolic disorders, hormone-dependent cancer). HR14 Men who have risk factors for myocardial infarction (e.g., high blood cholesterol, smoking, diabetes mellitus, family history of early-onset CAD) and who lack a history of gastrointestinal or other bleeding problems, or other risk factors for bleeding or cerebral hemorrhage. HR15 Persons with increased exposure to sunlight. HR16 Homosexually active men, intravenous drug users, recipients of some blood products, or persons in health-related jobs with frequent exposure to blood or blood products.</p>

^aThe recommended schedule applies only to the periodic visit itself. The frequency of the individual preventive services listed in this table is left to clinical discretion, except as indicated in other footnotes.

^bAnnually for women until age 75, unless pathology detected.

^cEvery 1-2 years for women until age 75, unless pathology detected.

^dFor women.

^eEvery 1-3 years.

^fEvery 10 years.

^gAnnually.

SOURCE: U.S. Preventive Services Task Force, *Guide to Clinical Preventive Services* (Baltimore, MD: Williams and Wilkins, 1989).

Table G-8-Pregnant Women

Screening	Counseling	High-risk categories
<p><i>First prenatal visit</i></p> <p>History</p> <p>Dietary intake</p> <p>Tobacco/alcohol/drug use</p> <p>Risk factors for intrauterine growth retardation and low birthweight</p> <p>Prior genital herpetic lesions</p> <p>Physical exam</p> <p>Blood pressure</p> <p>Laboratory/diagnostic procedures</p> <p>Hemoglobin and hematocrit</p> <p>ABO/Rh typing</p> <p>Rh(D) antibody test</p> <p>VDRL</p> <p>Hepatitis B surface antigen (HBsAg)</p> <p>Urinalysis for bacteriuria</p> <p>Gonorrhea culture</p> <p>High-risk groups</p> <p>Hemoglobin electrophoresis (HR1)</p> <p>Rubella antibodies (HR2)</p> <p>Chlamydial testing (HR3)</p> <p>Counseling and testing for HIV (HR4)</p>	<p>Nutrition</p> <p>Tobacco use</p> <p>Alcohol and other drug use</p> <p>Safety belts</p> <p>High-risk groups</p> <p>Discuss amniocentesis (HR5)</p> <p>Discuss risks of HIV infection (HR4)</p>	<p>HR1 Black women.</p> <p>HR2 Women lacking evidence of immunity (proof of vaccination after the first birthday or laboratory evidence of immunity).</p> <p>HR3 Women who attend clinics for sexually transmitted diseases, attend other high-risk health care facilities (e.g., adolescent and family planning clinics), or have other risk factors for chlamydial infection (e.g., multiple sexual partners or a sexual partner with multiple sexual contacts).</p> <p>HR4 Women seeking treatment for sexually transmitted diseases; past or present intravenous (IV) drug users; women with a history of prostitution or multiple sexual partners; women whose past or present sexual partners were HIV-infected, bisexual, or IV drug users; women with long-term residence or birth in an area with high prevalence of HIV infection in women; or women with a history of transfusion between 1978 and 1985.</p> <p>HR5 Women aged 35 and older.</p> <p>HR6 Women who continue to smoke during pregnancy.</p> <p>HR7 Women with excessive alcohol consumption during pregnancy.</p> <p>HR8 Women with uncertain menstrual histories or risk factors for intrauterine growth retardation (e.g., hypertension, renal disease, short maternal stature, low prepregnancy weight, failure to gain weight during pregnancy, smoking, alcohol and other drug abuse, and history of a previous fetal death or growth-retarded baby).</p> <p>HR9 Unsensitized Rh-negative women.</p> <p>HR10 Women with multiple sexual partners or a sexual partner with multiple contacts, or sexual contacts of persons with culture-proven gonorrhea.</p> <p>HR11 Women who engage in sex with multiple partners in areas in which syphilis is prevalent, or contacts of persons with active syphilis.</p> <p>HR12 Women who engage in high-risk behavior (e.g., intravenous drug use) or in whom exposure to hepatitis B during pregnancy is suspected.</p> <p>HR13 Women at high risk (see HR4) who have a nonreactive HIV test at the first prenatal visit.</p> <p>HR14 Women with risk factors for intrauterine growth retardation (see HR8).</p>

Table G-8--Pregnant Women—Continued

Screening	Counseling	High-risk categories
<p><i>Follow-up visits</i> (Schedule: weeks 6-8,8-10,11-16, 24-28, 32, 36, 38," 39; 40, 41")</p> <p>Blood pressure Urinalysis for bacteriuria Screening tests at specific gestational ages</p> <p>14-16 weeks: Maternal serum alpha-fetoprotein (MSAFP)^a Ultrasound cephalometry (HR8)</p> <p>24-28 weeks: 50 g oral glucose tolerance test Rh(D) antibody (HR9) Gonorrhea culture (HR10) VDRL(HR11) Hepatitis B surface antigen (HBsAg) (HR12) Counseling and testing forHIV (HR13)</p> <p>36 weeks: Ultrasound exam (HR14)</p> <p>This list of preventive services is not exhaustive. it reflects only those topics reviewed by the U.S. Preventive Services Task Force. Clinicians may wish to add other preventive services after considering the patient's medical history and other individual circumstances.</p>	<p>Nutrition Safety belts Discuss meaning of upcoming tests</p> <p>High-risk groups Tobacco use (HR6) Alcohol and other drug use (HR7)</p> <p>Remain alert for: Signs of physical abuse</p>	

^aNulliparas only.

^bMultiparas only.

^cThe recommended schedule applies only to the periodic visit itself. The frequency of the individual preventive services listed in this table is left to clinical discretion, except for services indicated at specific gestational ages.

^dWomen with access to counseling and follow-up services, skilled high-resolution Ultrasound and amniocentesis capabilities, and reliable, standardized laboratories.

SOURCE: U.S. Preventive Services Task Force, *Guide to Clinical Preventive Services* (Baltimore, MD: Williams and Wilkins, 1989).