

Preventive care checklist

The proactive way to stay healthy



Make time to visit your doctor once a year, even if you feel fine. Share your health history. Ask questions. And bring this handy guide to recommended screenings and their frequency.

Men



Testicular exam
Checks for changes in appearance and feel. Screens for cancer.
Yearly, from age 18.



Cholesterol test
Blood test. Indicates heart health.
Regularly, from age 35.*



Prostate exam
Rectal exam and blood test. Detects cancer.
Regularly, from 50.



Abdominal ultrasound
Imaging of the aorta, the main blood vessel in your midsection.
Once, 65-75.

Both

18-29

Body mass index
Height/weight ratio. Indicates overall health. Normal = 18.5-24.9.
Yearly, from age 18.

Blood pressure test
Exam using arm cuff. Indicates heart health. Ideal: 120/80.
Yearly, from age 18.

STD screening
Blood test or cell swab. Exam using arm cuff.
Yearly, depending on sexual activity.

30-39

40-49

Blood sugar test
Screens for Type II diabetes.
Regularly, from age 45.

Colonoscopy
Imaging of the colon via scope. Detects cancer.
Every 10 years, from age 45.*

50-59

65+

Women



Pap smear
Microscopic cell exam screens for cervical cancer.
Every 3 years, from age 21.



Mammogram
Breast X-ray to detect abnormal lumps. **Every 1 or 2 years, as early as age 40.***



Cholesterol test
Blood test. Indicates heart health.
Regularly, from age 45.*



Bone density scan
Enhanced X-ray. Detects osteoporosis.
Regularly, from age 65.*

Vaccines

They're not just for kids. Your doctor may recommend other shots depending on your risk factors.



Flu: Yearly, from age 18.

Tdap: Combined protection against tetanus, diphtheria and pertussis (whooping cough).
At least once as an adult.

Shingles: 1 or 2 shots, starting as young as age 50.

Pneumonia: 2 shots given, 1 year apart. Age 65+, or younger if you're at risk.

*If you have diabetes, smoke, have a family history of the illness or other risk factors, your doctor may recommend earlier screening.

Source: Centers for Disease Control and Prevention, 2019

Aetna Preventive Care Guidelines

**United States. Congress. House.
Committee on Appropriations.
Subcommittee on the Departments of
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to clinical research from both a business and a national health care perspective **Departments of Labor, Health and Human Services, Education, and Related Agencies Appropriations for 2003: Department of Health and Human Services, Public Health Service (excluding the National Institutes of Health)** United States. Congress. House. Committee on Appropriations. Subcommittee on the Departments of Labor, Health and Human Services, Education, and Related Agencies,2002 **Departments of Labor, Health and Human Services, Education, and Related Agencies Appropriations for 2003** United States. Congress. House. Committee on Appropriations. Subcommittee on the Departments of Labor, Health and Human Services, Education, and Related Agencies,2002 Extending Medicare Reimbursement in Clinical Trials Institute of Medicine,Committee on Routine Patient Care Costs in Clinical Trials for Medicare Beneficiaries,2000-02-17 Increasingly over the past five years uncertainty about reimbursement for routine patient care has been suspected as contributing to problems enrolling people in clinical trials Clinical trial investigators cannot guarantee that Medicare will pay for the care required and they must disclose this uncertainty to potential participants during the informed consent process Since Medicare does not routinely preauthorize care as do many commercial insurers the uncertainty cannot be dispelled in advance Thus patients considering whether to enter trials must assume that they may have to pay bills that Medicare rejects simply because they have enrolled in the trial This report recommends an explicit policy for reimbursement of routine patient care costs in clinical trials It further recommends that HCFA provide additional support for selected clinical trials and that the government support the establishment of a national clinical trials registry These policies 1 should assure that beneficiaries would not be denied coverage merely because they have volunteered to participate in a clinical trial and 2 would not impose excessive administrative burdens on HCFA its fiscal intermediaries and carriers or investigators providers or participants in clinical trials Explicit rules would have the added benefit of increasing the uniformity of reimbursement decisions made by Medicare fiscal intermediaries and carriers in different parts of the country Greater uniformity would in turn decrease the uncertainty about reimbursement when providers and patients embark on a clinical trial The Genome Defense Jorge L. Contreras,2021-10-26 The gripping true story of a Supreme Court civil rights battle to prevent biotech companies from owning the very thing that makes us who we are our DNA *National Guide to Funding in Health* Foundation Center,2003

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