## **The Preventive Care Checklist**



Vaccine or Screening	Frequency	AGES		
		20-40	40-60	<b>60</b> +
Vaccines				
Flu Shot	Annually	~	~	$\checkmark$
Tetanus Booster	Every 10 years	~	~	$\checkmark$
Whooping Cough (Tdap Booster)	Once in adulthood, unless vaccinated as a teenager; recommended during the early part of the third trimester of pregnancy to protect the newborn from pertussis	~	~	$\checkmark$
Human Papillomavirus (HPV) 3-Dose Series*	Once in adulthood, recommended between the ages of 13 to 26; shared clinical decision-making regarding HPV vaccination is recommended for some adults aged 27 through 45 who are not adequately vaccinated	~	~	
Shingles 2-Dose Series	Once in adulthood, after age 50		$\checkmark$	$\checkmark$
Pneumonia	Once in adulthood, after age 65			$\checkmark$

**Screenings** Most cancer screening guidelines change in context of family history, known genetic mutations, or other independent risk factors. People with genetic predispositions to cancer, including those with BRCA\*\*\* genes, may need earlier or more frequent screening. We recommend discussing this with your doctor.

Cholesterol	Every 4–6 years	$\checkmark$	$\checkmark$	$\checkmark$
Hepatitis B	At least one using a triple panel test	$\checkmark$	$\checkmark$	$\checkmark$
Hepatitis C	At least once in adulthood	$\checkmark$	~	$\checkmark$
HIV	At least once in adulthood up to age 64, recommended during pregnancy in many cases	$\checkmark$	~	~
Depression	Annually	$\checkmark$	~	$\checkmark$
Blood Pressure	Every 2 years (minimum)	$\checkmark$	~	$\checkmark$
Skin Cancer	Annual dermatologic exam	$\checkmark$	$\checkmark$	$\checkmark$
Colon Cancer	Colonoscopy, stool-based testing, or CT-scan-based imaging begin at age 45; colonoscopies are performed every 10 years, other tests are done more frequently		~	$\checkmark$
Type 2 Diabetes	Every three years; recommendations may vary depending on individual risk factors		~	~
Low-Dose Computed Tomography (LDCT) Lung Cancer	Recommended annually for adults ages 50–80 who have a 20-pack/year smoking history and currently smoke or have quit within the past 15 years		~	~
Osteoporosis	Begin by age 65 unless risk factors are present; frequency depends on results			~

It is important for all people to receive appropriate cancer screenings. The specific recommendations may differ somewhat for transgender or gender-diverse people. We recommend discussing this with your doctor.

Breast Cancer: Clinical Breast Exam	Every 1-3 years	$\checkmark$	~	$\checkmark$
Breast Cancer: Mammography	Recommended for adults ages 40+, every 1–2 years until age 74		~	$\checkmark$
Cervical Cancer	Every 3–5 years, depending on mode of screening	$\checkmark$	~	$\checkmark$
Prostate Cancer	Shared decision-making for prostate-specific antigen (PSA) tests is recommended for adults ages 55–69		~	$\checkmark$
Testicular Cancer	Regular self-exams and annual clinical exams or as deemed appropriate by a provider	$\checkmark$	~	$\checkmark$

\* Catch-up HPV vaccination is not recommended for all adults older than 26 years. HPV vaccines are not licensed for use in adults older than 45 years.

\*\* Screening should be discontinued once a person has not smoked for 15 years or develops a health problem that substantially limits life expectancy or the ability or willingness to have curative lung surgery.

\*\*\* According to the CDC, BRCA 1 and BRCA 2 are the genes most commonly affected in hereditary breast and ovarian cancer. About 3% of breast cancers (about 7,500 cases per year) and 10% of ovarian cancers (about 2,000 cases per year) result from inherited mutations in the BRCA1 and BRCA2 genes.