The Preventive Care Checklist



Vaccine or Screening	Frequency	AGES		
		20-40	40-60	60 +
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.