



Health Maintenance Guidelines

Flu vax

- All adults. Priority to those over 50 or with chronic disease, pregnant women (preservative-free), those in close contact with children 0-6 and those in close contact with high risk people.
- All children over 6 months: 0.25 ml 6 mo-35 mo, 0.5 ml 36 mo and older. Give 2nd dose 1 month after 1st to children under 9 years old who have never had any flu vaccine.

Pneumovax:

- 65 and older—if no prior Pneumovax or if prior was at least 5 years ago.
- Diabetes, Asthma, Smoker
- Other chronic disease (lung, heart, liver disease, alcoholism)
- Specific or general immune compromise: sickle cell disease (not trait), HIV, leukemia, lymphoma, Hodgkin's, myeloma, metastatic malignancy, transplant recipient, chronic steroids
- Asplenia

Tdap/Td (Adult)

- Primary series (3 shots at 0, 1 and 6 months) if never vaccinated. One dose should be Tdap.
- Td or Tdap (if never received Tdap) every 10 years.
- Tdap if last tetanus shot was >3years ago and did not contain pertussis vaccine.

Pap

- Girls and women **starting 3 years after first intercourse** but no earlier than age 21: every 2 years. BCEDP pays starting age 25.
- **Immunocompromised** (HIV, transplant, steroids): every 6 months X 2 then yearly.
- **After age 30** and 3 normal consecutive tests, every 3 years. May continue every 2 years if smoker, multiple partners.
- **After abnormal Pap**, see CHN guidelines.
- **After age 65** with at least 3 normal consecutive tests and no abnormal tests in past 10 years, no further Paps.
- **After hysterectomy for benign** disease, no further Paps.
- **After hysterectomy for dysplasia** (not Ca), once a year X 3, then every 3 years.
- **After cervical treatment for dysplasia** (cone bx, LEEP, cryo, laser), every 6 mos. X 2 then annual if normal, unless there were positive margins on treated tissue—per Gyn.

Breast Exam

- Yearly starting at age 21. BCEDP pays starting age 40.
- Alternatively, no clinical breast exam (see USPSTF guidelines 2010).

Mammogram

- Every 1-2 years starting at age 40-50 (minimum every 2 years starting at age 50). May discontinue at age 75 or 80 by provider discretion.

Colon cancer screening

- Start at age 50 -75
- Colonoscopy every 10 years OR fecal occult blood test (FOBT/Hemoccult/FIT) every year ± sigmoidoscopy every 5 years. Barium enema is alternative to sigmoidoscopy.
- **Family history of colon Ca or adenomatous polyps:**
 - **first-degree relative** (parent, sibling, or child) with colon cancer or adenomatous polyps diagnosed at **age <60 years**, or **2 first-degree relatives** diagnosed with colorectal cancer at any age should be advised to have screening colonoscopy starting at age 40 years or 10 years younger than the earliest diagnosis in their family, whichever comes first, and repeated every 5 years.

- **first-degree relative** with colon cancer or adenomatous polyps diagnosed at **age >60** years or **2 second-degree relatives** with colorectal cancer should be advised to be screened as average risk persons, but beginning at age 40 years.

Decision Alerts:

Depression Screening:

- Annually for patients ≥ 60 or patients with a chronic disease (DM or PHASE)
- Every 6 months for patients in the depression registry

Smoking status:

- Annually for patients >18