

## Health Maintenance Checklist for HEALTHY WOMEN 19 Years and Older

Name: \_\_\_\_\_

DOB: \_\_\_\_\_

COUNSELING/SCREENING	FREQUENCY	DATE	DATE	DATE	DATE
Age appropriate history & physical	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Alcohol misuse – screen, counsel	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Advance directives – counsel	At >18, and as needed				
Calcium – assess, encourage	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Dental health – counsel	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Depression screening	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Diet/nutrition – counsel or refer	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Physical Activity - counsel	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Folate – encourage	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Injury prevention - counsel	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Obesity – counsel or refer	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Sexual health - counsel	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
Tobacco Use – screen, counsel	19-49 yrs Q 1-3 yrs; 50+yrs Q1				
<b>IMMUNIZATIONS</b>					
Human papillomavirus (HPV)	19-26 yrs 3 doses				
Influenza	Q 1 yr for all adults				
Meningococcal	1 or more doses if higher risk				
MMR - if no evidence immunity	1 -2 doses<50 yrs, 1 dose if increased risk & ≥50 yrs				
Pneumococcal vaccine (Sequential administration & recommended intervals for PCV13 & PPSV23 – CDC/ACIP, Sept 2014)	<ul style="list-style-type: none"> <li>• Pneumococcal vaccine-naïve persons ≥ 65 yrs: PCV13 at ≥ 65 yrs; f/u PPSV23, 6-12 mos later*</li> <li>• PPSV23 already rec'd at ≥ 65 yrs: PCV13 ≥1 yrs since dose of PPSV23</li> <li>• PPSV23 rec'd &lt;65 yrs, persons now ≥ 65 yrs: PCV13 ≥ 1 yrs since dose of PPSV23; f/u PPSV23, 6-12 mos later*</li> <li>• Routine use of PCV13 for ≥ 19 yrs at increased risk</li> </ul>				
Tetanus-diphtheria (TD) / Tdap	Substitute 1 time dose of Tdap for TD; boost Q 10 yr – TD; ≥65 yrs Td (Tdap) if contact w/<12 mo. child. Td or Tdap can be used if no infant contact				
Varicella - if no evidence immunity	2 doses 4-8 wks apart				
Zoster	1 dose ≥ 60 yrs				
<b>PROPHYLAXIS</b>					
Aspirin – Discuss to prevent stroke	If at increased risk of stroke				
<b>TESTS/EXAMS</b>					
Breast cancer screening	Q 1-2 40-74 yrs; >74 yrs as needed				
Blood pressure	Q 2 yrs				
Cervical cancer screening	Q3 21-65 yrs. w/cytology or Q5 30-65 yrs w/cytology &HPV; >65 >CIN2 in last 20 yrs or w/out documentation of negative screening				
Colorectal cancer screening	50-75 yrs frequency varies with test selected; >75 individual basis				
Diabetes	Based on risk				
Gonorrhea, Chlamydia	Screen all sexually active women, including those who are pregnant if at increased risk				
Hearing impairment	≥65 yrs				
Height & weight, BMI	19-49 yrs Q 1-3yrs; 50+ yrs Q1				
Hepatitis C	Based on risk				
HIV screening	<65 yrs				
Lipids screening	Q 5 ≥ 20 yrs & at increased risk				
Osteoporosis screening	≥65 yrs; post menopausal if increased risk				
Other STI testing	Based on risk				
TB testing (PPD)	Based on risk				
Visual impairment	≥65 yrs				

\* Minimum interval between sequential administration of PCV13 and PPSV23 is 8 wks; PPSV23 can be given later than 6-12 mos after PCV13 if this window is missed.

Guidelines are intended to be flexible. They serve as reference points or recommendations, not rigid criteria. Guidelines should be followed in most cases, but there is an understanding that, depending on the patient, the setting, the circumstances, or other factors, care can and should be tailored to fit individual needs.