

2010 Preventive Care Guidelines



BlueCross BlueShield of Florida
An Independent Licensee of the Blue Cross and Blue Shield Association

How much do you know about childhood obesity?

Q. An obese child is more likely to have risk factors for:

- A. Cardiovascular disease
- B. Diabetes
- C. Bone and joint problems
- D. All of the above

A. D is correct. And obese children are more likely to become overweight adults with increased health risks.

Q. Your child can avoid risks for obesity by:

- A. Eating balanced healthy meals
- B. Being physically active daily for 60 minutes
- C. Both A and B
- D. A only

A. C is correct. Healthy eating and physical activity behaviors are the keys to preventing obesity.

Q. MyPyramid.gov helps you fight childhood obesity with:

- A. Personalized eating plans
- B. Interactive tools for diet and exercise
- C. Health tips and resources
- D. All of the above

A. D is correct. MyPramid.gov makes it easier to provide the right balance of food and physical activity to prevent obesity.



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Children & Adolescents (Birth–18 years of age) Preventive Schedule

Below are preventive guidelines from the Agency for Healthcare Research and Quality, the American Academy of Pediatrics and the Advisory Committee for Immunization Practices. Please visit their websites for more information.

General Health Exams														
Physical Exam and Developmental Behavioral Assessment	Every Visit													
Height and Weight	Every Visit, BMI beginning at age 2													
Blood Pressure	Annually, beginning at age 3													
Vision and Hearing and Dental Screening	Annually, beginning at age 3													
Screening At Risk Patients														
Cholesterol Screening	Annually, beginning at age 2													
Lead test, TB, Sickle Cell and STD Screening	As indicated by history and/or symptoms													
Anticipatory Guidance														
Injury/Violence Prevention	Annually, more often if indicated													
Nutrition Counseling	Every Visit													
Screen/Counseling for Tobacco, Alcohol and Substance Abuse	Every Visit starting at age 14, earlier if indicated													
Immunizations*														
	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	24 months	4-6 years	11-12 years	13-14 years	15 years	16-18 years
Hepatitis A						2 doses, 2 months apart								
Hepatitis B	•	— • —				— • —								
Diphtheria, Tetanus, Pertussis (DTaP)			•	•	•		— • —			•				
Tetanus, Diphtheria, Pertussis (Tdap)											•			
Haemophilus Influenza Type B						— • —								
Inactivated Poliovirus						— • —				•				
Measles, Mumps, Rubella (MMR)						— • —				•				
Varicella						— • —				•				
Pneumococcal						— • —					— • —			
Influenza										•				
										(Annually)				
Rotavirus			•	•	•									
Meningococcal												— • —		
Human Papillomavirus (HPV) Given as a 3-dose series													•	
													(Females Only)	

— • — Represents a range of recommended ages. CARE FOR PATIENTS WITH RISK FACTORS: Appropriate testing should be done at the doctor's discretion, based on family history and personal risk factors.

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Adult (age 19+) Preventive Schedule*

One of the most important steps you can take for your health is to schedule regular checkups. Use this schedule as a reference tool during discussions with your doctor to determine the best options specific to your needs.

Be sure to verify your benefits for preventive services so you'll know what's paid by your plan.

These recommendations were developed as a guide for our members and are not intended to replace your doctor's judgement. For more information, please visit:

Agency for Healthcare Research and Quality
www.ahrq.gov

American Cancer Society
www.cancer.org

American Medical Association
www.ama-assn.org

Advisory Committee for Immunization Practices
www.cdc.gov

Routine Health Guide	
Blood Pressure, Height and Weight	Annually
BMI and Waist Circumference	Annually
Breast Exam by Practitioner	Annually
Physical Exam/Dental Exam/Health Guidance	Annually
Recommended Diagnostic Check-Ups	
Abdominal Aortic Aneurysm Check	One-time screening for men ages 65 to 75 who have ever smoked
Bone Mineral Density Screening	Women starting at age 65; if increased risk for fractures and osteoporosis start at age 60
Chlamydia, HIV, other Sexually Transmitted Disease (STD) Screening	Sexually active, non-pregnant women age 24 and younger should be screened. Over 24 talk to your doctor.
Cholesterol and Lipid Screening	Screening begins at age 20, for those at high risk
Colorectal Cancer Screening	Ages 50-75; With either a colonoscopy, fecal occult blood test or sigmoidoscopy
Blood Sugar Test	Annually
Mammogram	Annually at ages 40+ (per the American Cancer Society); Every other year at ages 50+ (per the U.S. Preventive Services Task Force)
Pap Test	Sexually active women or women age 21+, should have a Pap Test every year for 3 years with normal results; then one every 2-3 years thereafter
Prostate Cancer Screening	Discuss with your physician
Healthy Diet/Obesity	Annually
Guidance	
Screen/Counseling for Tobacco, Alcohol, Depression and Substance Abuse	Every visit, as indicated
Immunizations*	
Diphtheria, Tetanus, Pertussis (Tdap)	Age 19+: Booster every 10 years
Influenza**	Ages 50+: 1 dose annually. By doctor recommendation ages 19-49: 1 dose
Pneumococcal (polysaccharide)**	Ages 65+: 1 dose. By doctor recommendation ages 19-64: 1 dose
Hepatitis A, Hepatitis B, Meningococcal	Ages 19+: if other risk factors are present
Human Papillomavirus Virus (HPV)	Females ages 19-26: 3 doses (may be administered to females as young as 9 years)
Shingles (Zoster)	Ages 60+: 1 dose

* Some immunizations are contradicted for certain conditions, including pregnancy and HIV Infection. Consult AHRQ for a complete list, and discuss with your physician.

**For select populations. Details on recommendations may be found on the Center for Disease Control Web site at www.cdc.gov/nip/recs/adult-schedule.htm#print.