

Healthy Adult Preventive Care Guidelines

	Test/Exam/Vaccination	Gender	Age	Frequency
Vaccines	COVID-19 (any CDC-approved vaccine)	M/F	Five and older	Per CDC guidelines
	Hepatitis B Vaccine • Heplisav-B*	M/F	18-59	Two doses, one month apart
	Human Papillomavirus (HPV) Vaccine	M/F	26 and younger 27-45	Three doses over six months Discuss with your doctor
	Influenza Vaccine	M/F	Six months and older	Annually in the fall
	Pneumococcal Vaccines** • Prevnar 20	M/F	65 and older	Once
	Tetanus, Diphtheria and Pertussis (Tdap)	M/F	11 and older	Every 10 years
Cancer Screenings	Shingrix® Vaccine (Shingles)	M/F	50 and older	Two doses, two to six months apart. Once
	Colorectal Cancer Screening*** • Fecal Immuno Testing (FIT) OR • Colonoscopy	M/F	45 to 75	Annually Every 10 years
	Mammogram	F	40 to 49 50 to 75	Discuss with your doctor Every one or two years
	Cervical Cancer Screening	F	21 to 29	PAP every three years if screening is normal****
		F	30 to 65	HPV based screening with or without PAP every five years if screening is normal
Other Preventive Screenings	Prostate Cancer Screening	M	50 to 70	Discuss with your doctor
	Advanced Health Care Directive	M/F	Variable - any adult	Once, re-address as needed
	Cholesterol Screening	M/F	Variable	Every three to five years if screening is normal
	Chlamydia/Gonorrhea Screening	F	16 to 24	Yearly
	Diabetes Screening	M/F	Variable	Every three to five years if screening is normal
	Hearing Screening	M/F	65 and older	Discuss with your doctor
	Hepatitis C Screening	M/F	18-79	Once
	Osteoporosis Screening	M	70 and older	Discuss with your doctor, risk factors considered
		F	65 and older	Every five to eight years if screening is normal
	“Annual Physical”*****	M/F	18 and older	Discuss with your doctor
	Visual Acuity Screening	M/F	65 and older	Discuss with your doctor
	High Blood Pressure Screening	M/F	18 and older	Every visit
HIV Screening	M/F	15 to 65	Once, if low risk	

Recommendations as of May 2022

THE US PREVENTIVE SERVICES TASK FORCE (USPSTF) DOES NOT ENDORSE ANNUAL LABS IN HEALTHY ADULTS NOR DOES IT SUPPORT ROUTINE VITAMIN D SCREENING, URINALYSIS, BLOOD COUNT TESTING OR METABOLIC PANELS IN THE ABSENCE OF RELATED SYMPTOMS. UNNECESSARY LAB SCREENING IS NOT PROVEN TO BE BENEFICIAL TO HEALTHY INDIVIDUALS AND IS DISCOURAGED.

*Heplisav-B is contraindicated in pregnancy and <18; for these populations, continue to administer 3 vaccine alternate series as indicated

**If Pneumovax already received: wait 1 year before administering Prevnar 20. If Prevnar 13 already received: wait 1 year before administering Pneumovax; Prevnar 20 not currently recommended.

***Annual Fecal Immuno Testing (FIT) is considered an effective and convenient screen for all patients without symptoms or risks for colon cancer. For patients 60 years and older, when colon cancer is more common, a colonoscopy might be a more appropriate screen. Personal preferences will guide decision making.

****HPV co-testing with PAP ages 25-29 optional. Society guidelines vary.

*****There is no evidence to support an “annual physical” in adults who are up to date with all preventive care. At any regularly scheduled appointment, preventive care will be reviewed. Chronic conditions do require periodic visits and it is important to follow up as recommended. For specific concerns, a regular office visit is recommended, not a ‘physical.’ Physicals are designed to focus on preventive care. If there are no chronic conditions, no concerns and all preventive care is current, a periodic health check up every two to three years is suggested. Please find more information regarding annual exams or health check-ups at sharp.com/rees-stealy/upload/Choosing-Wisely_Health-Checkups.pdf.