

Preventive Guidelines for Adults

To stay healthy, adults need preventive check-ups. CareFirst BlueCross BlueShield and CareFirst BlueChoice, Inc. offer these guidelines that describe the preventive services that most adults need. Depending on your personal health care needs or risk factors, your doctor may give you a different schedule. If you think you may be at risk for a particular condition, talk to your doctor.

Please note that the following services may not be covered by your health plan. Call Member Services at the phone number on your ID card to verify your benefits.



Counseling and Education

Depending on the patient's age, health care providers will discuss one or more of these topics or provide screenings during exams:

- **Drug and alcohol use.**
- **Tobacco use.**
- **Harmful effects of smoking on children's health.**
- **Exercise and diet, including recommended changes for high cholesterol and diabetes.**
- **Injury prevention.**
- **Dental health.**
- **Hepatitis A, B and C.**
- **Sexual behavior.**
- **Sexually transmitted diseases, including chlamydia, gonorrhea & HIV.**
- **Tuberculosis (TB).**
- **Use of alternative medicines and therapies.**
- **Depression and domestic violence.**
- **Aspirin therapy.**



Screenings for Men & Women Ages 21 & Older

- **Medical history and physical exam:** at the advice of the doctor.
- **Height:** at least once with follow-up as needed.
- **Weight:** screen all adults for obesity; body mass index (BMI) recommended.
- **Blood pressure:**
 - ◆ At least every 2 years if blood pressure is less than 120/80.
 - ◆ Every year if systolic measure (top number) is 120-139 or diastolic measure (bottom number) is 80-90.
- **Cholesterol:** every 5 years for men and women ages 20 and older.
- **Diabetes:** every 3 years for patients with any of these risk factors:
 - ◆ Obesity (BMI greater than 25).
 - ◆ Family history of diabetes.
 - ◆ Women who have had diabetes during pregnancy or who have had a baby more than 9 pounds.
 - ◆ High blood pressure.
 - ◆ High cholesterol.
 - ◆ High or low blood sugar.
 - ◆ History of vascular disease.
 - ◆ Inactive.
 - ◆ African American, Latino, Native American, Asian American or Pacific Islander race.

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Screenings for Men & Women Ages 21 & Older

- **Colorectal cancer:** men and women ages 50-75 with average risk.
 - ◆ Colonoscopy every 10 years, or
 - ◆ Flexible sigmoidoscopy every 5 years, with fecal occult blood test every 3 years.
 - ◆ Yearly fecal occult blood test.
- **HIV (Human immunodeficiency virus):** for men and women at increased risk for HIV infection.

Screenings for Men Only

- **Prostate cancer:** discuss the possible benefits and harm of screening and treatment with your doctor.
- **Aortic abdominal aneurysm:** one-time ultrasonography for men ages 65 to 75 who smoke or have smoked.

Screenings for Women Only

- **Breast cancer:** Routine screening every 2 years for women aged 50 to 74 years. The decision to start screening before the age of 50 should be between you and your doctor. Discuss the possible benefits and harm of screening and treatment with your doctor.
- **Hereditary breast and ovarian cancer screening:** Women who carry the genes associated with increased risk (a strong family history of breast or ovarian cancer) should be referred for genetic counseling and evaluation for testing.
- **Cervical cancer:**
 - ◆ Pap smear every 2 years for ages 21-30.
 - ◆ If 3 exams in a row are normal, women ages 30 and older may be screened once every 3 years.
 - ◆ Women with certain risk factors may need more frequent screening.
 - ◆ Screening is not suggested for women who have had a total hysterectomy for benign disease.
- **Chlamydia:** for sexually active women ages 24 and younger who are not pregnant; the doctor may advise the test for women older than age 25.
- **Osteoporosis:**
 - ◆ Begin at age 65 or older for women at average risk. Women at greater risk should be screened at an earlier age.
 - ◆ Counseling for women ages 21 and older to get enough calcium.
- **Menopause counseling:** Women who are of menopausal age should be counseled about menopause, risks and benefits of estrogen replacement, treatment and lifestyle changes.



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