#### **Medical Examinations**

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| **Ages** (recommended for all) | **18 – 39** | **40 – 65** | **65 and older** |
| **Blood Pressure Screening** | 3 – 5 years | Yearly | yearly |
| **Cholesterol Screening** |  | every 4 – 6 years | every 4 – 6 years |
| **Dental Exam** | every 6 months | every 6 months | every 6 months |
| **Eye Exam** | every 2 years | every 2 years | yearly |
| **Immunizations** | *Tetanus – Diphtheria* *booster*: every 10 years*Flu* *vaccine*: yearly | *Tetanus – Diphtheria booster*: every 10 years*Flu vaccine*: yearly*Shingles* or *Herpes* *Zoster* *vaccine*: after 50 and every 5 years | *Tetanus* – *Diphtheria* *booster*: every 10 years*Flu* *vaccine*: yearly*Shingles* or *Herpes* *Zoster vaccine*: after 50 and every 5 years *Pneumococcal vaccine*: once for life |

#### **Women**

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| **Ages** (recommended for all) | **18 – 39** | **40 – 65** | **65 and older** |
| **Pelvic Exam & Pap Smear** | 1 – 2 years (recommended for cervical cancer screening. Screenings should begin within one year of vaginal intercourse or by age 21) | yearly(women who are sexually active should be screened for *Chlamydia)*  | yearly(recommended for cervical cancer screening) |
| **Breast Exam** | every 3 years and a monthly self-exam | every year and a monthly self-exam | every year and a monthly self-exam |
| **Mammogram** |  | every year 55+ | yearly |

#### **Men**

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| **Ages** (recommended for all) | **18 – 39** | **40 – 65** | **65 and older** |
| **Colon Cancer Screening** |  | yearly stool test and a*Sigmoidoscopy* flexible every 5 years  | *Colonoscopy* every 10 years*Double Contrast Barium Enema* and *Computed Tomographic Colon* age 50 - 70 |
| **Cholesterol** | once in 20s | 34 and older, every 5 years | every 5 years |
| **Abdominal Aortic Aneurysm Screening** | all men who have smoked should get screened |  |  |
| **Prostate Exam** |  | age 50+(may include a blood test) | age 50+(may include a blood test) |
| **Osteoporosis Screening** |  | ages 50 – 70+ recommended bone density test | ages 50 – 70+ recommended bone density test |
| **Testicular Exam** | yearly | yearly | yearly |
| **Hearing Test** | every 3 years | every 3 years | every 3 years |