



Lifestyle/Mental Health

- Tobacco use - screening and counseling
 - 5 A's model: Ask, Advise, Assess, Assist, Arrange
- Alcohol use - screening & counseling
 - Alcohol Use Disorders Identification Test-Concise (AUDIT-C)
 - How often did you have a drink containing alcohol in the past year?
 - How many drinks did you have on a typical day when you were drinking in the past year?
 - How often did you have 6 or more drinks on one occasion in the past year?
- Drug use - screening and counseling
- STI risk
 - Sexual history
- Depression
 - PHQ-2 +/- PHQ-9 history
 - Geriatric Depression Scale
 - Edinburgh Postnatal Depression Scale
- Obesity (BMI ≥ 30)



Immunizations

- Influenza every year
- Td/Tdap vaccine every 10 years
- Zoster vaccine after age 50
- One or two pneumococcal vaccines at age 65 for average risk
- Hep A, Hep B, Meningococcal, MMR, VZV are all worth considering in certain populations



Screening Considerations

- Hypertension**
 - 18+ with office blood pressure management
 - Annually in 40+
 - Annually with increased risk
 - Every 3-5 years in 18-39 without risk factors + normal BP reading
- Diabetes mellitus/Prediabetes**
 - 35-70 with BMI ≥ 25
 - Fasting glucose, A1c, or GTT
 - Repeat every 3 years if normal
- Dyslipidemia**
 - Every 5 years for ≥ 20 if low CV risk
 - More frequently if CV risk factors, especially in 40-75
- Colorectal Cancer**
 - 45-75 in average risk
 - Colonoscopy every 10 years, sDNA-FIT every 3 years
- Lung Cancer**
 - Ages 50-80 years
 - 20 pack-year smoking history
 - Currently smoke or have quit within the past 15 years
- Hepatitis C**
 - One time screening for 18-79
 - Periodic screening for at-risk persons
 - Pregnant women should be screened every pregnancy
 - Obtain consent prior to screening
- HIV**
 - 15-65 one time, repeat if increased risk
 - Screen annually for high-risk
- Syphilis**
 - Screen if increased risk
 - Pregnant women during pregnancy



Men

- Prostate cancer screening**
 - Shared-decision making in 55-69, individualized follow up
 - PSA is preferred modality
- AAA**
 - One time US, men 65-75 with smoking history



Women

- Intimate partner violence**
 - All women of reproductive age
- Chlamydia/Gonorrhea**
 - Sexually active women ≤ 24
 - ≥ 25 at increased risk
- Cervical cancer**
 - 21-29: cytology every 3 years
 - 30-65
 - Cytology alone every 3 years
 - FDA-approved hrHPV testing every 5 years
 - Co-testing every 5 years
 - 65+: may discontinue if adequate prior screening except in high risk situations
- Breast cancer**
 - Offer CBE to women 25+ annual or biennial
 - Offer mammogram 40-50 annual or biennial
 - Recommend 50+ annual or biennial
- Osteoporosis**
 - DXA in postmenopausal women < 65 with risk factors, ≥ 65 all others