



2018 Well Elderly Preventive Care Guidelines

Health Partners Plans

Maintenance Flow Sheet

Patient Name:	Date of Birth: ___ / ___ / _____	Sex: M / F
Allergies:	Habits: Smoking: Y / N	Alcohol: Y / N Drugs: Y / N

CRITERIA	20__	20__	20__	20__	20__
Date of Visit:					
COMPLETE HISTORY AND PHYSICAL EXAM					
INTERIM HISTORY AND DIRECTED PHYSICAL EXAM					
PHYSICAL ASSESSMENT (Annual)					
Blood Pressure Measurement					
Height					
Weight					
Body Mass Index (BMI) calculated					
SCREENINGS					
Colorectal Screening: At age 65 Fecal Occult Blood annually or Colonoscopy every 10 years or Sigmoidoscopy every 5 years					
Mammography¹: Biannual for women ages 65 years and older or can continue yearly screening. Screening should continue as long as a woman is in good health and is expected to live 10 more years or longer.					
Digital Rectal Exam (DRE): (Male annually, starting at age 40)					
Papanicolaou Smear²: Female age 21-65 every 3 years or women between the ages of 30 and 65 should have both a Pap test and an HPV test every 5 years. Women who are at high risk for cervical cancer may need to be screened more often. Women over 65 who had regular screenings with normal results should not be screened.					
Chlamydia (all sexually active Female)					
Cholesterol (every 5 years, high risk more often)					
Fasting Blood Glucose (every 3 years at age 45, high risk more often)					
Prostate-specific Antigen (PSA) discussion³ (Male starting at age 55)					
Thyroid Stimulating Hormone (TSH/Thyroxine)					
Depression Evaluation⁴ (annually)					
Vision Screening (Snellen Chart) (annually, starting at age 65)					
Test/Inquire for Hearing Impairment (annually, starting at age 65)					
Mental Status Exam (annually, starting at age 65)					
Osteoporosis Risk Screening: (women at risk at age 65)					
Abdominal Aortic Aneurysm Screen (male smokers ages 65-75)					
IMMUNIZATIONS: CDC ADULT IMMUNIZATION RECOMMENDATIONS					
Tetanus – Diphtheria Booster (replace with Tdap one time dose) (every 10 years)					
Influenza Vaccine (annually)					
Pneumococcal Vaccine⁵ (once at age 65 if not done previously)					
Measles – Mumps – Rubella Booster (adult born during/before 1957 lacking disease or vaccination)					
Varicella /Shingles vaccine (age 60 and older)					
HIV screening⁶: Adults age 21 to 65 years of age and older than 65 if high risk					
Hepatitis B (at high risk)					
MEDICATIONS					
Calcium/Vitamin D					
Aspirin – Chemoprophylaxis/Counseling (men age 45 & women age 55)					
COUNSELING					
Diet					
Exercise					
Safety & Injury Prevention: Seat belt, helmet, firearms, car safety					
Tobacco/Second Hand Smoking					
Alcohol/Drugs					
Abuse & Violence Prevention					
Sexual Behavior					
Protection from UV Light					
Dental Health					
Elder Abuse (annually, starting at age 65)					
Fall Prevention (annually, starting at age 65)					
Anticipatory Guidance					
OTHER					
Care of Older Adults⁷					
Advance Directives					
Medication Review					
Functional Status Assessment					
Pain Assessment					



Well Elderly Preventive Care Guidelines adapted from:

- 1. Screening Mammography:** Breast Cancer Screening Guidelines - <http://www.cancer.org/healthy/findcancerearly/cancerscreeningguidelines/american-cancer-society-guidelines-for-the-early-detection-of-cancer>. The USPSTF concludes that the current evidence is insufficient to assess the benefits and harms of screening mammography in women 75 years and older. <http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/breast-cancer-screening>
- 2. Cervical Cancer Screening:** <http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/cervical-cancer-screening?ds=1&s=cervica>
- 3. HIV screening:** <http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/human-immunodeficiency-virus-hiv-infection-screening?ds=1&s=hiv>
- 4. Prostate Cancer Screening:** The American Urological Association recommends that PSA screening, in conjunction with a digital rectal examination, should be offered to asymptomatic men aged 40 years or older who wish to be screened, if estimated life expectancy is greater than 10 years. The American Cancer Society emphasizes informed decision making for prostate cancer screening: men at average risk should receive information beginning at age 50 years, and black men or men with a family history of prostate cancer should receive information at age 45 years.

The American College of Preventive Medicine recommends that clinicians discuss the potential benefits and harms of PSA screening with men aged 50 years or older, consider their patients' preferences, and individualize screening decisions.
- 5. Depression Screening:** The USPSTF recommends screening for depression in the general adult population, including pregnant and postpartum women. Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up. <http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/depression-in-adults-screening1?ds=1&s=depression>
- 6. Centers for Disease Control and Prevention, Recommended Adult Immunization Schedule:** Available at <http://www.cdc.gov/vaccines/schedules/downloads/adult/adult-combined-schedule.pdf>
- 7. U.S. Preventive Services Task Force, Published Recommendations:** <http://www.uspreventiveservicestaskforce.org/Page/Name/recommendations>
- 8. U.S. Department of Health and Human Services and U.S. Department of Agriculture: 2015 – 2020 Dietary Guidelines for Americans. 8th Edition, December 2015:** Available at <http://health.gov/dietaryguidelines/2015/guidelines/>.
- 9. HealthyPeople 2020:** <https://www.healthypeople.gov/2020/leading-health-indicators>
- 10. American Diabetes Association, Diabetes Care:** http://care.diabetesjournals.org/content/25/suppl_1/s21.full
- 11. American Academy of Family Physicians:** Summary of Recommendations for Clinical Preventive Services, April 2016



Well Elderly Preventive Care Guidelines adapted from:

<https://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/guide/section1.html>

1. Injury Prevention

- Lap-shoulder belts
- Bicycle/motorcycle helmets
- Smoke detectors
- Carbon monoxide detectors
- Safe storage and handling of firearms; removal if appropriate
- Occupational risk counseling
- Motor vehicle safety (older adults)
- Fall Prevention

2. Substance Abuse

- Tobacco cessation to include pharmacotherapy, social support for cessation, and skills training/problem solving
 - Pregnant women and parents with children living at home should also be counseled on the potentially harmful effects of smoking on fetal and child health
 - Nicotine replacement therapy is recommended as an adjunct for selected patients
- Avoid alcohol/drug use while driving, swimming, boating, using firearms, etc.
- Screening to detect problem and hazardous drinking
- Screening should involve a careful history of alcohol use and/or the use of standardized screening questionnaires

3. Sexual Behavior

- STD prevention; abstinence; avoid high-risk behavior; condoms/female barrier with spermicide
- Unintended pregnancy; contraception

4. Diet and Exercise

- Limit fat and cholesterol; maintain caloric balance; emphasize grains, fruits and vegetables
- Adequate calcium and vitamin D intake (females); add foods rich in calcium; supplement as needed
- Regular physical activity
- Intensive counseling and behavioral interventions to promote sustained weight loss in obese adults

5. Protection from UV Light

6. Elder Abuse and Violence

- Counsel for violence prevention at home

7. Abuse and Violence

- Counsel for violence prevention at home, school and in social situations

8. Dental Health

- Regular visits to dental health provider
- Floss and brush with fluoride toothpaste daily