

..... *Recommended Screening Guide for Healthy Women*

These recommendations assume no risk factors or prior abnormal screening test results. If you feel you are at high risk for any of these diseases you may have to be screened more often and should consult your provider.

Screening Tests	Ages 18-39	Ages 40-49	Ages 50-64	Ages 65 & Older
GENERAL HEALTH				
Focused check-up, including weight & height	Discuss with your health care provider	Discuss with your health care provider	Discuss with your health care provider	Discuss with your health care provider
Thyroid Test (TSH)			Every 5 years	Every 5 years
HEART HEALTH				
Blood Pressure	Starting at age 21, then once every 1-2 years	Every 1-2 years	Every 1-2 years	Every 1-2 years
Cholesterol Test		Every 5 years	Every 5 years	Every 5 years
BONE HEALTH				
Bone Mineral Density Test				Obtain once, discuss with provider
DIABETES				
Blood Sugar Test		Starting at age 45, then every 3 years	Every 3 years	Every 3 years
BREAST HEALTH				
Breast Exam		Yearly by provider; monthly self-breast exam		
Mammogram (x-ray of breast)		Discuss with provider	Every 1-2 years	Every 1-2 years
REPRODUCTIVE HEALTH				
Pap Test & Pelvic Exam	Every 1-3 years after 3 consecutive normal tests. Discuss with your provider.			
Chlamydia Test	If sexually active, yearly until age 25	If you are at high risk for chlamydia or other STIs* you may need this test.		
Other Sexually Transmitted Infections**	If you or your partner have multiple sexual partners; or if you have a partner with an STI or sexual contact with STIs; or a personal history of STIs, you may need an STI test.			

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Brought to you by the UCSF Women's Health Clinical Research Center.

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COLORECTAL HEALTH				
Colonoscopy			Once	
Flexible Sigmoidoscopy			If no colonoscopy, every 5 years	If no colonoscopy, every 5 years
Fecal Occult Blood Test			If no colonoscopy or sigmoidoscopy, yearly	If no colonoscopy or sigmoidoscopy, yearly
EYE AND EAR HEALTH				
Vision exam with eye care provider	Once between age 20 and 39	Every 2-4 years	Every 2-4 years	Every 1-2 years
Hearing test	Discuss with your provider	Discuss with your provider	Discuss with your provider	Discuss with your provider
DENTAL				
Oral Exam	1-2 times every year	1-2 times every year	1-2 times every year	1-2 times every year
MENTAL HEALTH				
Mental Health Screening	Discuss with your provider	Discuss with your provider	Discuss with your provider	Discuss with your provider
IMMUNIZATIONS				
Influenza Vaccine	Discuss with your provider	Discuss with your provider	Discuss with your provider	Recommended yearly
Pneumococcal Vaccine	Discuss with your provider	Discuss with your provider	Discuss with your provider	One time only
Tetanus-Diphtheria Booster vaccine	Every 10 years	Every 10 years	Every 10 years	Every 10 years

* STIs refers to Sexually Transmitted Infections

** Sexually Transmitted Infections include diseases such as syphilis, gonorrhea, HIV, human papilloma virus and hepatitis

