

Health Maintenance Guidelines for Women



Customize your plan:

These guidelines apply to healthy women in the general population. The right plan for your care may differ based on your medical history, family history, personal preferences and lifestyle, as well as your physician's experience. You and your physician should work together to develop a specific preventive health screening plan for you.

For additional national guidelines, visit www.nhlbi.nih.gov/guidelines; or www.ahrq.gov/clinic/uspstfix.htm

Add education and counseling:

- Smoking Cessation
- Alcohol and Drug Abuse Prevention
- Seat Belt Safety
- Safe Sex Practices
- Preconception Counseling
- Contraception Counseling
- Nutrition and Exercise
- Firearm Safety
- Domestic Violence Screening

Also, for women entering, during and after menopause:

Osteoporosis Prevention

Check your coverage:

Some tests and vaccinations may not be covered by Medicare or by your health insurance plan. Check on your specific coverage before obtaining them.

Screening Guidelines for Women

SCREENING/TEST	WHO	FREQUENCY							
Breast Cancer Screening									
Physician Breast Exam	For women ages 40 and over	Annually							
Mammography	For women ages 40 and over	Annually Frequency for women between 40 and 49 may be decreased to every 2 years Discuss risk factors and family history with your doctor							
Breast Self-Exams (after instruction)	For women ages 20 and over	Monthly							
Cervical Cancer Screening									
Pap Smear/Human Papilloma Virus (HPV) Testing	For women ages 21 to 65	Pap test without HPV test every 2 years up to age 30; Pap test with HPV test every 3 years after age 30 (Screening Paps are not required after hysterectomy unless surgery was performed for cancer or precancerous disease)							
Cholesterol Screening									
Lipid Panel, including LDL	For all women starting at age 20, or earlier if Cardiac Risk Profile reveals high risk	Every 5 years, or more frequently based on results and risk profile							

SCREENING/TEST	WHO	FREQUENCY								
Colorectal Cancer Screening										
Screening Colonoscopy	For women age 50 and	Every 10 years (preferred)								
High Sensitivity Stool Occult Blood Testing	over with no family history of colorectal cancer and/or precancerous polyps	Annual Screening								
Flexible Sigmoidoscopy	For women age 40, or 10 years younger than the youngest known case of colorectal cancer and/or precancerous polyps in the family	Every 5 years, with high sensitivity stool occult blood testing every 3 years								
Diabetes Screening										
Fasting Plasma Glucose (preferred) or	For women ages 45 and over	Every 3 years								
Hemoglobin A1C	BMI greater than 25 with at least one additional risk factor	Every 3 years								
Hypertension Screening										
Blood Pressure Measurement	For all women, regardless of age	Every 1-2 years								
Osteoporosis Screening										
DXA (bone-density testing)	For women ages 65 and over, or starting at menopause if additional risk factors exist	Baseline testing, with follow-up interval based on test results								
Sexually Transmitted Disease	Screening									
Routine Chlamydia Screening	For women through age 25 who are sexually active, and women over 25 who are at increased risk	Annually								
HIV Screening	All women ages 13-64 should be offered the test	One-time screening with follow-up test based on discussion with your doctor of individual risk								

Immunization Guidelines

VACCINATION	WHO	FREQUENCY				
Human Papilloma Virus (HPV) Vaccine (Gardasil® and Cervarix® — for Cervical Cancer)	For all females between ages 11 and 26	One series of 3 vaccines				
Influenza (Flu) Vaccine	All those 6 months and older	Annually				
	Particularly important for high-risk adults of any age with diabetes or heart, lung, liver, kidney or immune disease; pregnant women; and those in contact with high risk patients or who care for infants less than 6 months old	Annually				
Pneumococcal Vaccine (for Pneumonia)	All women ages 65 and over	Single vaccination only				
	For smokers, and other high-risk adults of any age with diabetes, cancer, or heart, lung or immune disease	Initial vaccination, with single revaccination 5 years later				
Diphtheria/Tetanus/Pertussis Vaccine	For women ages 19 to 64	One time in place of the Diphtheria/Tetanus Booster				
Diphtheria/Tetanus Vaccine	For women up to age 65	Every 10 years				
	For women 65 or over	Single vaccination only				
Varicella Zoster Vaccine (for Shingles)	For women ages 60 and older	Single vaccination; no revaccination required				

Other vaccines that you may need:

Hepatitis A Hepatitis B Meningococcal (Meningitis)

Cleveland Clinic Women's Health

Main Campus	Wooster	Willoughby Hills	Westlake	Twinsburg Medical Offices	Strongsville	Solon	Lorain	Lakewood	ndependence	Hillcrest Hospital	Fairview Hospital	Elyria	Chagrin Falls	Brunswick	Broadview Heights	Beachwood	Avon Lake	٩von	
216.444.6601	330.287.4500	440.943.2500	440.899.5555	330.888.4000	440.878.2500	440.519.6800	440.204.7400	216.521.4400	216.986.4000	440.312.2229	216.476.7000	440.366.9444	440.893.9393	330.225.8886	216.986.4000	216.839.3000	440.930.6800	440.899.5555	

For more information about Women's Health services, visit us at clevelandclinic.org



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