



Preventive health guidelines

As of June 2021

Your guide to staying well

Regular preventive care is one of the best ways you can make sure you and your family are at your healthy best. This guide will help you stay on track with recommendations for what kind of care you may need and when. Talk to your doctor about which exams, tests, and shots are right for you.

This guide is based on suggestions from the following independent groups, as well as state-specific requirements:

- American Academy of Family Physicians
- American Academy of Pediatrics
- Advisory Committee on Immunization Practices
- American College of Obstetricians and Gynecologists
- American Cancer Society
- Centers for Disease Control and Prevention
- U.S. Preventive Services Task Force

To learn more about what your plan pays for, see your *Certificate of Coverage* or call the Member Services number on your ID card. You also can check [anthem.com](https://www.anthem.com) to learn about health topics that matter to you. Use [anthem.com/preventive-care](https://www.anthem.com/preventive-care) to search for your age- and gender-specific information.

Check your plan materials for plan benefit details.

Well-baby and -child screenings

Well-baby exam — birth to 2 years¹

Infants who leave the hospital less than two days (48 hours) after birth need to be seen by a doctor within two to four days after being born. You might talk to the doctor about newborn care and development, nutrition and feeding, and safety, as well as parent and family health and well-being (including your living situation). At these exams, your baby may receive vaccines and screenings in addition to a physical examination.

Screenings	Age (in months)									
	Birth	1	2	4	6	9	12	15	18	24
Weight, length, and head circumference (the length around the head)	At each visit									
Body mass index (BMI) percentile										At 24
Newborn metabolic (such as phenylketonuria), sickle cell, and thyroid screening	At birth to 2 (ideally at 3 to 5 days); bilirubin at birth									
Critical congenital heart defect	At birth									
Developmental, psychosocial, and behavioral	At each visit									
Hearing	As a newborn and when your doctor suggests									
Vision	At each visit									
Oral/dental health							Dental exams at each visit, starting at age 1, if needed ² Establish a dental home (ongoing relationship with the dentist that includes all aspects of oral care), starting at 12 to 24 months.			
Hemoglobin or hematocrit (blood count)						Once between 9 and 12				
Lead testing (risk assessment, as appropriate)							At 12			At 24
Autism									At 18	At 24
Maternal postpartum depression (for new mom)	At 1	At 2	At 4	At 6						
Blood pressure risk assessment	At each visit									
Lipid disorder risk assessment	At each visit									
Tuberculosis	Screening based on risk factors									

Well-child exam — ages 2^{1/2} to 10 years¹

Depending on your child's age, you and your doctor may discuss topics such as how to promote and develop healthy nutrition, physical activity and personal habits; education and school issues; emotional development and mental health; and physical growth and safety, as well as family and life issues. At these well-child exams, your child may receive vaccines and medical screenings in addition to a physical examination.

Screenings	Age (in years)								
	2 ^{1/2}	3	4	5	6	7	8	9	10
Height, weight, body mass index (BMI percentile) ³	Each year								
Developmental, psychosocial, and behavioral	At each visit								
Vision	Each year								
Hearing	Each year								
Oral/dental health	Each year; fluoride varnish and fluoride prescription								
Hemoglobin or hematocrit (blood count)	Risk assessment every year								
Blood pressure risk assessment		Each year, starting at 3							
Lipid disorder risk assessment								Once between 9 and 11	
Lead testing	Risk assessments through age 6								
Tuberculosis	Screening based on risk factors								

Well-child to young adult exam — ages 11 to 20 years¹

The doctor may talk to you about issues such as home life and school performance; physical growth and development (oral health, body image, healthy eating, physical activity, and sleep); emotional well-being (mood regulation and mental health, sexuality); how to reduce certain risks (for example: pregnancy and sexually transmitted infections; tobacco, e-cigarettes, alcohol, prescription, or street drugs; hearing damage); and safety (seat belt and helmet use, sun protection, substance use, riding in a vehicle, and firearm safety), that are important for the age group of your child or adolescent. At these exams, your child may receive vaccines and medical screenings in addition to a physical examination.

Screenings	Age (in years)									
	11	12	13	14	15	16	17	18	19	20
Height, weight, body mass index (BMI) ³	Each year									
Developmental, psychosocial, and behavioral	Each year									
Depression		Each year								
Blood pressure	Each year									
Vision	Each year									
Hearing	Each year									
Oral/dental health	Each year; fluoride varnish and fluoride prescription each year through 16									
Hemoglobin or hematocrit (blood count)	Risk assessment each year									
Gonorrhea and chlamydia	For sexually active women ages 24 and younger									
Human immunodeficiency virus (HIV)					Once between 15 and 18					
Lipid disorder							Once between 17 and 21			
Urine (as your doctor suggests) and sexually transmitted infections	For sexually active teens, beginning at age 11									
Tobacco, alcohol, or drug use	Risk assessment each year, beginning at age 11									

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² Receive fluoride varnish on your teeth when your doctor suggests. Your doctor may also give you a fluoride prescription, depending on your drinking water.

³ Height and weight is used to find BMI. BMI is used to see if a person has the right weight for height, or is under or overweight for height. The BMI percentile is used in children and young adults under 18. BMI percentile also uses age and gender to see if a person is under or overweight.

Adult screenings — women¹

Wellness exam

Set up a physical each year to make sure you are at your healthy best. At these exams, your doctor might talk with you about health and wellness issues. These may include diet and physical activity; family planning and folic acid for women who are of the age to become pregnant; sexual behavior and screening for sexually transmitted infections, including HIV and hepatitis B (if high risk), as well as intimate partner violence. Issues may also include how to prevent injuries; counseling to reduce the risks of developing skin cancer; special risks you might have for cancer (such as family history) and steps you can take to reduce those risks; misuse of drugs and alcohol; how to stop using tobacco; secondhand smoke; dental health; and mental health, including screening for depression. At this visit, you may receive vaccines and the screenings listed below:

Screenings	Age (in years)									
	19 to 21	21 to 29	30	35	40	45	50	55	60	65 and older
Height, weight	Each year or as your doctor suggests									
Body mass index (BMI)	Each year or as your doctor suggests									
Blood pressure	Each year or as your doctor suggests; high measurements should be confirmed in the home setting									
Breast cancer: mammogram						Each year from ages 40 to 65+ ²				
Cervical cancer: ages 21 to 29		Every three years								
Cervical cancer: ages 30 to 65			Should have a Pap test every three years or HPV testing alone or in combination with Pap test (co-testing) every five years.							
Cervical cancer: ages 65+										Stop screening at age 65 if last three Pap tests or last two co-tests (Pap plus HPV) within the previous 10 years were normal. If there is a history of an abnormal Pap test within the past 20 years, discuss continued screening with your doctor.
Colorectal cancer						At age 45 and continuing until 75, your doctor may suggest any one of these test options: Direct visualization tests <ul style="list-style-type: none"> • Colonoscopy • CT colonography • Flexible sigmoidoscopy Stool-based tests <ul style="list-style-type: none"> • Fecal immunochemical test (FIT) • Guaiac-based fecal occult blood test (gFOBT) • Multi-targeted stool DNA test (FIT-DNA) 				
Gonorrhea and chlamydia	Sexually active women ages 24 and younger									
Cholesterol						Statin use may be recommended for some people ages 40 to 75 years who are at increased risk for cardiovascular disease.				
Contraceptive methods and counseling ³	Each year or as your doctor suggests									
Glucose screening for type 2 diabetes					As your doctor suggests, from ages 40 to 70, if you are overweight or obese, or if you have high glucose, you should talk to your doctor about intensive counseling interventions to promote a healthy diet and physical activity.					
Osteoporosis							The test to check how dense your bones are should start no later than age 65; women at menopause should talk to their doctor about osteoporosis and have the test when at risk.			
Hepatitis C	Screen once between the ages of 18 and 79 years.									

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² Women should talk to their doctor and make a personal choice regarding the optimal age at which to begin screening. Women aged 50 to 74 may have the option to screen every two years.

³ For sexually active females, to better avoid unwanted pregnancies and space pregnancies to promote optimal birth outcomes.

Pregnant women

Pregnant women should see their doctor or OB/GYN in their first three months of pregnancy for a first visit and to set up a prenatal care plan. At this visit, your doctor will check your health and the health of your baby.

Based on your past health, your doctor may want you to have these tests, screenings, or vaccines:

- **Depression** — screening during and after pregnancy
- **Diabetes** during pregnancy
- **Hematocrit/hemoglobin** (blood count)
- **Hepatitis B**
- **HIV**
- **Preeclampsia (blood pressure)** — during pregnancy
- **Rubella immunity** — to find out which women need the rubella vaccine after giving birth
- **Rh(D) blood type and antibody testing** — if Rh(D) negative, repeat test at 24 to 28 weeks
- **Syphilis**
- **Urinalysis** — Urine for asymptomatic bacteriuria, as your doctor suggests

The doctor may talk to you about what to eat and how to be active when pregnant, as well as staying away from tobacco, drugs, alcohol, and other substances. Your doctor will follow up during pregnancy and after birth to support breastfeeding, access to lactation supplies, and counseling.

Other tests and screenings:

Some tests given alone or with other tests can be used to check the baby for health concerns. These tests are done at certain times while you are pregnant. The best test to use and the best time to do it depends on many factors. These include your age, as well as your medical and family history. Talk to your doctor about what these tests can tell you about your baby, the risks of the tests, and which tests may be right for you:

- **Amniocentesis**
- **Chorionic villus sampling**
- **Special blood tests**
- **Cell-free DNA** (a blood test to check for chromosomal abnormalities in the baby)
- **Ultrasound tests**, including special tests (used with cell-free DNA tests) and routine two-dimensional tests to check on the baby

Medications:

If you are at high risk for a condition called preeclampsia, your doctor may recommend the use of low-dose aspirin as preventive medication.

Vaccines:

If you are pregnant during the flu season (October to March), your doctor may want you to have the inactivated flu vaccine. Pregnant adolescents and adults should be vaccinated with the Tdap vaccine with each pregnancy. Tdap should be administered between 27 and 36 weeks gestation, although it may be given at any time during pregnancy. Currently, available data suggests that vaccinating earlier in the 27- through 36-week window will maximize passive antibody transfer to the infant for the most benefit. While other vaccines may be given in special cases, it is best to receive the vaccines you need before you become pregnant. Women should always check with their doctor about their own needs.

You should **not** receive these vaccines while you are pregnant:

- **Measles, mumps, rubella (MMR)**
- **Varicella**

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Please note: Coverage of these services varies by health plan.



Adult screenings — men

Wellness exam

The doctor might talk with you about health and wellness issues. These may include diet and physical activity; family planning; how to prevent injuries; misuse of drugs and alcohol; how to stop using tobacco; secondhand smoke; sexual behavior and screening for sexually transmitted infections, including HIV and hepatitis B (if high risk); counseling to reduce the risks of developing skin cancer; special risks you might have for cancer (such as family history) and steps you can take to manage those risks; dental health; and mental health, including screening for depression. At this visit, you may receive vaccines and the screenings listed below:

Screenings	Age (in years)										
	19	20	25	30	35	40	45	50	55	60	65 and older
Height, weight	Each year or as your doctor suggests										
Body mass index (BMI)	Each year or as your doctor suggests										
Blood pressure	Each year or as your doctor suggests; high measurements should be confirmed in the home setting										
Cholesterol	Statin use may be recommended for some people ages 40 to 75 years who are at increased risk for cardiovascular disease.										
Colorectal cancer	At age 45 and continuing until 75, your doctor may suggest any one of these test options: Direct visualization tests <ul style="list-style-type: none"> • Colonoscopy • CT colonography • Flexible sigmoidoscopy Stool-based tests <ul style="list-style-type: none"> • Fecal immunochemical test (FIT) • Guaiac-based fecal occult blood test (gFOBT) • Multi-targeted stool DNA test (FIT-DNA) 										
Glucose screening for type 2 diabetes	As your doctor suggests, from ages 40 to 70, if you are overweight or obese. If you have high glucose, you should talk to your doctor about intensive counseling interventions to promote a healthy diet and physical activity.										
Prostate cancer	If you are ages 55 to 69, discuss the risks and benefits of prostate cancer tests with your doctor.										
Abdominal aortic aneurysm	Screen once for ages 65 to 75 if you have ever smoked.										
Hepatitis C	Screen once between the ages of 18 and 79 years.										

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Suggested vaccine schedule

For more information about vaccines and the current recommendations on COVID-19 vaccinations, visit [cdc.gov/vaccines](https://www.cdc.gov/vaccines).

Vaccine	Age														
	Birth	1 to 2 months	2 months	4 months	6 months	6 to 18 months	12 to 15 months	15 to 18 months	19 to 23 months	4 to 6 years	11 to 12 years	13 to 18 years	19 to 60 years	60 to 64 years	65+ years
Hepatitis B	✓	✓		✓		✓									
Rotavirus (RV)			✓ Two-dose or three-dose series												
Diphtheria, tetanus, pertussis (DTaP)			✓	✓	✓			✓		✓					
Tetanus, diphtheria, pertussis (Td/Tdap)											✓ Tdap		✓ Td booster every 10 years		
Haemophilus influenzae type b (Hib)			✓ Three- or four-dose series – first dose at 2 months – last dose at 12-15 months												
Pneumococcal conjugate (PCV)			✓	✓	✓		✓								
Inactivated polio virus (IPV)			✓	✓		✓				✓					
Influenza (flu)			✓ Suggested each year from 6 months to 65+ years of age; two doses at least four weeks apart are recommended for children between 6 months and 8 years who are receiving the vaccine for the first time												
Measles, mumps, rubella (MMR)							✓			✓					
Varicella (chickenpox)							✓			✓					
Hepatitis A							✓ Two-dose series at least 18 months apart								
Human papillomavirus (HPV)											✓ Two-dose series				
Meningococcal											✓	✓ Ages 16-23			
Pneumococcal 13-valent conjugate (PCV13)															✓
Pneumococcal polysaccharide (PPSV23)															✓
Zoster															✓ Two-dose series for age 50+

✓ Shows when vaccines are suggested

Hepatitis A – If you have not had this vaccine before, you should talk to your doctor about a catch-up vaccination.

Hepatitis B – The first dose should be administered within 24 hours of birth to address births outside the hospital. You may receive an extra dose (four-dose series) at 4 months if the combination vaccine is used after the birth dose. If you are 18 or older, you should receive a screening if you are at high risk for infection.

Rotavirus (RV) – Receive a two-dose or three-dose series (depends on brand of vaccine used).

Tdap (children through adults) – If you are 7 years of age or older and have not had this vaccine before, you should receive a single dose of Tdap, followed by another dose of Tdap or Td at least four weeks later. Another dose of either Tdap or Td should follow six to 12 months later.

Haemophilus influenzae type b (Hib) – Receive a three-dose or four-dose series (depends on brand of vaccine used).

Pneumococcal conjugate (PCV) – Children aged 14 months through 59 months who have received an age-appropriate series of 7-valent PCV (PCV7), should receive a single supplemental dose of 13-valent PCV (PCV13) administered.

Influenza (flu) – Refer to [flu.gov](https://www.flu.gov) or [cdc.gov](https://www.cdc.gov) to learn more about this vaccine. (Children 6 months to 8 years of age having the vaccine for the first time should have two doses separated by four weeks.)

Measles, mumps, rubella (MMR) and varicella (chickenpox) – All adults born after 1957 should have records of one or more doses of MMR vaccine, unless they have a medical contraindication to the vaccine or laboratory evidence of immunity to each of the three diseases.

Human papillomavirus (HPV) – Two doses of the HPV vaccine should be given to 11- to 12- year-olds at least six months apart. Teens and young adults who start the series later, at ages 15 through 26, will continue to need three doses of HPV vaccine to protect against cancer-causing HPV infection. The vaccination series can start at age 9.

Meningococcal – When given to healthy adolescents who are not at increased risk for meningococcal disease, two doses of MenB-FHbp should be administered at zero and six months. If the second dose is given at an interval of six months, a third dose should be given at least six months after the first dose. For persons at increased risk for meningococcal disease and during serogroup B outbreaks, three doses of MenB-FHbp should be administered at zero, one to two, and six months.

Pneumococcal 13-valent conjugate (PCV13)/Pneumococcal polysaccharide (PPSV23): Adults ages 65 and older and certain adults younger than 65 who are at risk should receive both a PCV13 and PPSV23. Ask your doctor what dose is best for you.

Zoster – For adults 50 years and older, two doses of the Shingrix (HZ/su) vaccine, given two to six months apart, are recommended. This includes individuals who previously received the Zostavax shingles recombinant vaccine.

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