

Name: _____

Date: _____

PREVENTATIVE HEALTH SCREENING QUESTIONNAIRE

1. When was your last cholesterol screening? _____
2. When was your last mammogram? _____
3. When was your last pap smear and pelvic exam? _____
4. When was your last colonoscopy? _____
5. When was your last bone density exam? _____
6. When was your last diabetes screening? _____

PREVENTATIVE HEALTH RECOMMENDATIONS

Cholesterol	Fasting blood test in men > 35, women > 45; earlier if risk factors -obesity, hypertension, family history, diabetes, etc.
Breast Cancer	Baseline Mammogram between age 35-40; yearly after 40
Cervical Cancer	Pap Smear annually; starting at age 21 or 3 years after first sexual intercourse; whichever is earlier
Colon Cancer	Colonoscopy starting at age 50 and every 5 years after
Osteoporosis	Bone Density test for women > 65 years old; begin earlier if risk factors present
Diabetes Mellitus	Blood screening in adults with hypertension or elevated cholesterol