


GENERAL POPULATION PREVENTIVE MEDICINE GUIDELINES

	TABLE 2: 11 TO 24 YEARS*
PERIODIC HEALTH EXAMINATION RECOMMENDATIONS	
SCREENING	
Blood pressure	Each visit
Height & weight	Adolescents - calculate and plot BMI at each visit
Chlamydia screen	Sexually active non-pregnant young women ages ≤ 24 years
Fasting lipoprotein profile	Every 5 years in adults age 20 years or older
Hematocrit or hemoglobin	Annually for all menstruating adolescents, ages 11-21 years
Papanicolaou (Pap) test (females)	Should begin approximately 3 years after first sexual intercourse, or by age 21 years, whichever comes first, then annually.
Rubella serology or vaccination history	Females > age 12 years; Serologic testing, documented vaccination history, and routine vaccination against rubella (preferably with MMR) are equally acceptable alternatives.
Assess for problem drinking	
IMMUNIZATIONS	
Hepatitis B	Age 11-12 years, if not previously immunized, and any adult seeking protection from HBV. Current visit, 1 and 6 months later.
Human Papillomavirus	Females, age 11–12 years, then 2 months and 6 months after initial dose. Recommended for all females ≤ age 26 years. Minimum age for administration is age 9 years. Administer to females age 13-18 years if not previously vaccinated.
Influenza	Annually, ages 11 - 18 years.
Meningococcal conjugate vaccine	Age 11-12 years and at age 13- 18 years if not previously vaccinated (MCV4 or MPSV4). Previously unvaccinated college freshman living in dormitories. (MCV4)
MMR	Age 11- 18 years, if no previous second dose of MMR.
Tetanus and diphtheria toxoids, and acellular pertussis (Tdap)	Age 11-12 years, if the recommended childhood DTP/DTaP vaccination series has been completed, and no previous Td booster received. Age 13-18 years, who missed the age 11-12 year Tdap or received Td only are encouraged to receive one dose of Tdap 5 years after the last Td/DTaP dose.
Tetanus-diphtheria toxoids (Td) Tetanus, diphtheria and pertussis (Tdap)	Td booster every 10 years; substitute one dose of Tdap for Td if not previously vaccinated with Tdap.
Rubella	Females > age 12 years; Serologic testing, documented vaccination history, and routine vaccination against rubella (preferably with MMR) are equally acceptable alternatives.
Varicella	< Age 13 years, without evidence of immunity, administer 2 doses at least age 3 months apart. ≥ age 13 years, without evidence of immunity, administer 2 doses at least 4 weeks apart.
CHEMOPROPHYLAXIS	
Multivitamin with folic acid	Females planning / capable of pregnancy
COUNSELING	
Injury Prevention	Dental Health
Burn Prevention	Regular visits to dental care provider
Firearm Safety	Floss, brush with fluoride toothpaste daily
Sports Safety	
Traffic Safety	Substance Abuse
Water Safety	Avoid alcohol misuse
	Avoid illicit drug use
Diet and Exercise	Avoid tobacco use/tobacco cessation interventions
Limit fat and cholesterol; maintain caloric balance: emphasize grains,	Counsel parents who smoke regarding effects of passive smoking on children's health
Adequate calcium intake for	
<small>*11-12 y/o - One visit is required for immunizations. Because of lack of data and differing patient risk profiles, the scheduling of additional visits and the frequency of the individual preventive services listed in this table are left to clinical discretion, except as indicated.</small>	