Midlands Family Medicine



611 West Francis St. Suite 100 North Platte, NE 69101 Phone: (308) 534-2532 Fax: (308) 534-6615

Education

Routine Health Care for Women

Routine checkups can find treatable problems early. For many medical problems, early treatment can help prevent more serious complications. The value of checkups and how often you have them depend mainly on your age. Your personal medical history and that of your family are also important.

What needs to be checked and how often?

The tests listed below are recommended for routine health care by the US Preventive Services Task Force (USPSTF) and the American Academy of Family Practice (AAFP). They are the minimum checkup recommendations. You must discuss with your health care provider how often you should have physical exams and how often you need these or other tests. The frequency depends on your symptoms and your personal and family medical history.

- Blood pressure measurement: all women
- Clinical breast exam by your provider: at least every 3 years if you are 20 to 39 years old and every year if you are 40 years or older
- Mammogram: every 1 to 2 years after age 40
- Pap test: at least every 3 years if you have ever had sex and have not had your uterus removed
- Cholesterol test: if you are age 45 or older
- Fasting blood sugar for type 2 diabetes: if your blood pressure or blood lipids (cholesterol) are high or you have a family history of type 2 diabetes
- Colorectal cancer test: if you are over age 50. You may need to start colorectal screening earlier if an immediate family member has had colon cancer. Possible tests include sigmoidoscopy or colonoscopy at least every 10 years and a test for rectal blood every year.
- Chlamydia test: if you are sexually active and 25 years old or younger or if you have a high risk of sexually transmitted disease (STD)
- Gonorrhea, syphilis, and HIV tests: if you are at high risk for these infections, including if you have a new sex partner or more than 1 partner, a history of STDs, a partner with an STD, or a partner who is bisexual
- Tuberculosis (TB) test: if you have a high risk of TB; for example, because you are a health worker, drug user, or immigrant, or because you have close contact with someone infected with TB
- **Bone density test** for osteoporosis: at age 65 years if your risk is normal and at age 60 if you have an increased risk (for example, because you smoke or do not get regular exercise). Osteoporosis is a disease that thins and weakens bones to the point where they break easily.
- Hearing test: if you are 65 or older
- Vision test: if you are 65 or older.

Remember, these are the minimum recommendations for routine tests. You and your health care provider must discuss what is right for you based on your symptoms and your personal and family medical history.

Many other tests are often done at routine checkups, but there is no current evidence that they are helpful as routine screening tests for healthy women. Examples of such tests are a CBC (complete blood count), thyroid tests, and urine tests. When you have no symptoms of illness, you should discuss the pros and cons of these and other tests with your health care provider. Each test involves some expense.

What shots do I need?

The following shots are recommended for adults:

Tetanus (Td) booster shot at least every 10 years. If you are under age 65, you should get the new Tdap booster
to protect you better against whooping cough (pertussis) as well as tetanus. If you are 65 or older, this new vaccine
has not yet been approved for your age group. Because babies are most susceptible to complications from whooping

cough, Tdap is especially recommended for adults caring for children, even if it has been less than 10 years since your last tetanus booster.

- **Flu shot** every fall if you are 50 or older, you have a high risk for complications from the flu, or you might spread the flu to others who are at high risk. Women who will be pregnant during flu season should also have a flu shot.
- Measles, mumps, and rubella shot (MMR) if you were born after 1956 unless you have already had the shot or the
 diseases
- Hepatitis A shot if you are at risk, for example, through travel or your job, including military service
- **Hepatitis B shot** for all teens and young adults, age 12 to 24 years, who have not had hepatitis or a hepatitis shot and for all adults who are at risk of infection. This includes, for example, women who have more than 1 sex partner or whose partner has more than 1 partner, or who have a sexually transmitted infection, abuse IV drugs, or plan to travel where hepatitis B is common.
- Pneumococcal pneumonia shot if you are age 65 or older. You may need to get it at a younger age if you have a high-risk medical condition, such as diabetes.
- Varicella (chickenpox) if you have never had chickenpox.
- **Zoster (shingles) vaccine:** if you are 60 or older. The vaccine can help prevent shingles. It can also reduce the pain caused by shingles.

What other things I can do to stay healthy?

You should expect your health care provider to advise you regularly on other ways to stay healthy. Some of these may include:

- Breast self-exams: Check your breasts every month.
- Substance use: Don't use tobacco or illegal drugs. Avoid using alcohol while driving, swimming, boating, etc.
- **Diet and exercise**: Try to maintain your weight at a comfortable, healthy level. Limit the fat and cholesterol in your diet. Include a lot of whole grains, fruits, and vegetables in your diet. Get regular physical activity or exercise.
- Injury prevention: Use lap and shoulder belts when you drive. Use a helmet when you ride a motorcycle or bicycle. If you are around guns or other firearms, practice safe handling and make sure to keep them in locked cabinets when they are not in use. Install smoke detectors in your home. Set your hot water heater to less than 120°F (49°C).
- Dental health: Visit your dentist regularly. Brush your teeth with fluoride toothpaste daily. Also floss your teeth daily.
- **Sexual behavior**: Prevent sexually transmitted infections by avoiding high-risk sexual behavior and by using latex or polyurethane condoms every time you have sexually contact if you are not in a long-term relationship with just one partner who has no other partners.
- Hormone use: During or after menopause, discuss the risks and benefits of use of estrogen and progesterone
 replacement with your health care provider.

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