

Child

Preventive Care Time Line

This information includes preventive care guidelines developed for healthy adults and children by leading health authorities. Talk with your doctor about these recommendations to determine what is appropriate for you and your family members' individual needs. You and your doctor will determine the tests that are right for you based on your age, gender and family history. **Important: coverage for preventive care services may vary by benefit program. Deductibles, coinsurance and/or copayments may apply. Please call Aetna Member Services for details.**

Birth to Age 6

SCREENING TESTS*	RECOMMENDATIONS
Newborn screening (PKU, sickle cell Hemoglobinopathies, hypothyroidism)	Once — Newborns
Head circumference	Periodically — Between birth and 2 months old
Height and weight	At each well-child visit for infants and then at least annually
Vision	Periodically — Younger than 5 years old
Hearing	Once — Newborns before 1 month of age

IMMUNIZATIONS**	RECOMMENDATIONS
Immunization schedules often change. The most current recommendations for immunizations may be found on the Centers for Disease Control website at www.cdc.gov/nip .	
Hepatitis A	2 Doses — 1 dose between age 12–23 months; 1 dose at least 6 months later
Hepatitis B	3-4 Doses — 1 dose at birth; 1 dose 1–2 months later; 1 dose at 4 months+ and 1 dose between 24 weeks–18 months
Diphtheria-Tetanus-Pertussis (DTaP)	5 Doses — 1 dose at age 2, 4, and 6 months; 1 dose between 15–18 months; and 1 dose between 4–6 years old
Polio (IPV)	4 Doses — 1 dose at age 2 and 4 months; 1 dose between 6–18 months; and 1 dose between 4–6 years old
H. Influenzae type b (Hib)	3-4 Doses — 1 dose at age 2, 4, and 6 months+; 1 dose between 12–15 months
Pneumococcal Conjugate	4 Doses — 1 dose at age 2, 4, and 6 months; 1 dose between 12–15 months
Measles-Mumps-Rubella (MMR)	2 Doses — 1 dose between 12–15 months and 1 dose between 4–6 years old
Chicken pox (Varicella)	1 Dose — 1 dose between 12–18 months; or any child after the first year without history of chicken pox or previous immunization
Influenza**	Annually — Between 6–23 months
Rotavirus	3 Doses — series should not be started later than 12 weeks and last dose should not be given later than 32 weeks

Ages 7 to 12 Years

SCREENING TESTS*	RECOMMENDATIONS
Height and weight	Periodically

IMMUNIZATIONS**	RECOMMENDATIONS
Immunization schedules often change. The most current recommendations for immunizations may be found on the Centers for Disease Control website at www.cdc.gov/nip .	
Measles-Mumps-Rubella (MMR)	1 Dose — Second of 2-dose series between 11–12 years if not previously given between 4–6 years old
Chicken Pox (Varicella)	1 Dose — 1 dose at any time if child has not been previously immunized and does not have a history of chicken pox
Booster Tetanus-Diphtheria and Pertussis (TdaP)	1 Dose — 1 dose between 11–12 years old
Meningococcal	1 Dose — 1 dose between 11–12 years old
Human Papillomavirus (HPV) (minimum age 9 years)	Administer the first dose of the HPV vaccine series to females at age 11–12 years Administer the second dose 2 months after the first dose, and the third dose 6 months after the first dose Boys age 11–26 may also be vaccinated with one of the HPV vaccines to reduce their likelihood of getting genital warts.

Ages 13 to 18 Years

SCREENING TESTS*	RECOMMENDATIONS
Blood pressure	Periodically — 18 years and older
Height and weight/Body Mass Index (BMI)	Periodically — 18 years and older
Depression	Routinely — 13 years and older
Alcohol misuse screening and behavioral health counseling	Routinely — 18 years and older
Chlamydia	If sexually active
Pap test***	Every 1–2 years — Beginning at age 21 or earlier if sexually active; talk with your physician to discuss the method of screening that is right for you.
Rubella titer or vaccination history ¹	For women of childbearing age

IMMUNIZATIONS**	RECOMMENDATIONS
Immunization schedules often change. The most current recommendations for immunizations may be found on the Centers for Disease Control website at www.cdc.gov/nip .	
Meningococcal	1 Dose — 1 dose at the start of high school or the start of college if not given before
Booster Tetanus-Diphtheria and Pertussis (TdaP)	1 Dose — 1 dose if not given before
Human Papillomavirus (HPV)	Administer the HPV vaccine series to females at age 13–18 years if not previously vaccinated

*Based on the recommendations of the U.S. Preventive Services Task Force (USPSTF), as they appear in the *Guide to Clinical Preventive Services: Report of the U.S. Preventive Services Task Force*, 2nd ed. (1996) and the *Guide to Clinical Preventive Services*, 3rd ed. (2001–2005).

**Based on the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) 2006 Child Immunization Schedule.

***Based on the cervical cancer screening recommendations of the American Cancer Society (ACS).

+Dependent on immunization type.

++Household/close contacts and out-of-home caregivers of children ages 0–23 months should also receive the influenza immunization.

¹Rubella titer, documented vaccination history and routine vaccination against rubella are equally acceptable alternatives.

Note: While this information is believed to be accurate as of 2/1/06, recommendations change. For the most up-to-date recommendations, visit the USPSTF at www.ahrq.gov/clinic/uspstf/uspstoptics.htm, the ACS at www.cancer.org and the CDC at www.cdc.gov.

Adult

Preventive Care Time Line

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Ages 18 and Older

IMMUNIZATIONS**	RECOMMENDATIONS
Human Papillomavirus (HPV)	3 doses — 26 years and younger if not previously immunized; second and third doses 2 and 6 months after the first dose
Measles, Mumps and Rubella (MMR)	1–2 doses — for adults without a history of infection or previous immunization
Varicella-Zoster (Chicken Pox)	2 doses — at least 4–8 weeks apart for adults without a history of chicken pox or previous immunization

Ages 19 to 39 Years

SCREENING TESTS*	RECOMMENDATIONS
Blood pressure	Periodically — 18 years and older
Height and weight/Body Mass Index (BMI)	Periodically — 18 years and older
Cholesterol	Every 5 years — Men 35 years and older
Pap Test***	Every 1–2 years—if 30 years and older, either a Pap smear every 2 to 3 years after 3 consecutive normal results or HPV DNA test plus a Pap smear every 3 years if results of both tests are negative; talk with your physician to discuss the method of screening that is right for you.
Chlamydia	Annually – 25 years and younger and sexually active
Rubella titer or vaccination history ¹	Women of childbearing age
Depression	Routinely – 18 years and older
Alcohol misuse screening and behavioral health counseling	Routinely – 18 years and older

IMMUNIZATIONS**	RECOMMENDATIONS
Immunization schedules often change. The most current recommendations for immunizations may be found on the Centers for Disease Control website at www.cdc.gov/nip .	
Tetanus-Diphtheria (Td)	Every 10 years

Ages 40 to 64 Years

SCREENING TESTS*	RECOMMENDATIONS
Blood pressure	Periodically — 18 years and older
Height and weight/Body Mass Index (BMI)	Periodically — 18 years and older
Cholesterol	Every 5 years — Women 45 years and older Every 5 years — Men 35 years and older
Rubella titer or vaccination history ¹	Women of childbearing age
Mammogram	Every year or as physician prescribes
Pap test***	Every 2–3 years after 3 consecutive normal results or HPV DNA test plus a Pap smear every 3 years if results of both tests are negative; talk with your physician to discuss the method of screening that is right for you.
Prostate***	Annually — Starting at age 50, both the prostate-specific antigen (PSA) blood test ² and digital rectal examination (DRE) should be offered. Talk with your physician to discuss if screening is right for you.
Colorectal***	Beginning at age 50, yearly stool blood test (FOBT), OR flexible sigmoidoscopy every 5 years, OR yearly stool blood test plus flexible sigmoidoscopy every 5 years, OR double contrast barium enema every 5 years, OR colonoscopy every 10 years. Talk with your physician to discuss the method of screening that is right for you.
Depression	Routinely — 18 years and older
Alcohol misuse screening and behavioral health counseling	Routinely — 18 years and older

IMMUNIZATIONS**	RECOMMENDATIONS
Immunization schedules often change. The most current recommendations for immunizations may be found on the Centers for Disease Control website at www.cdc.gov/nip .	
Tetanus-Diphtheria (Td)	Every 10 years
Influenza	Annually — 50 years and older

Ages 65 and Over

SCREENING TESTS*	RECOMMENDATIONS
Blood pressure	Periodically — 18 years and older
Height and weight/Body Mass Index (BMI)	Periodically — 18 years and older
Cholesterol	Every 5 years — Women 45 years and older Every 5 years — Men 35 years and older
Mammogram	Every year or as physician prescribes
Pap Test***	Every 2–3 years after 3 consecutive normal results or HPV DNA test plus a Pap smear every 3 years if results of both tests are negative; Women 70 years and older may stop screening. Talk with your physician to discuss the method of screening that is right for you.
Colorectal***	Beginning at age 50, yearly stool blood test (FOBT), OR flexible sigmoidoscopy every 5 years, OR yearly stool blood test plus flexible sigmoidoscopy every 5 years, OR double contrast barium enema every 5 years, OR colonoscopy every 10 years. Talk with your physician to discuss the method of screening that is right for you.
Prostate***	Annually — Starting at age 50, both the prostate-specific antigen (PSA) blood test ² and digital rectal examination (DRE) should be offered. Talk with your physician to discuss if screening is right for you.
Osteoporosis (Bone Density Test)	Routinely — Women 65 years and older
Depression	Routinely — 18 years and older
Alcohol misuse screening and behavioral health counseling	Routinely — 18 years and older

IMMUNIZATIONS**	RECOMMENDATIONS
Influenza	Annually - 50 years and older
Pneumococcal	1 Dose - 65 years and older
Tetanus-Diphtheria (Td)	Every 10 years

*Based on the recommendations of the U.S. Preventive Services Task Force (USPSTF), as they appear in the *Guide to Clinical Preventive Services: Report of the U.S. Preventive Services Task Force*, 2nd ed. (1996) and the *Guide to Clinical Preventive Services*, 3rd ed. (2001–2005).

**Based on the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) 2005–2006 Adult Immunization Schedule.

***Based on the cervical cancer screening, prostate cancer screening, and double contrast and colonoscopy colorectal cancer screening recommendations of the American Cancer Society (ACS).

¹Rubella titer, documented vaccination history and routine vaccination against rubella are equally acceptable alternatives.

²Some controversy exists as to the value of the PSA in most populations.

Note: While this information is believed to be accurate as of 2/1/06, recommendations change. For the most up-to-date recommendations, visit the USPSTF at www.ahrq.gov/clinic/uspstf/uspstf.htm, the ACS at www.cancer.org and the CDC at www.cdc.gov.