



# Why preventive care is important

Preventing disease and detecting disease early, if it occurs, are important to living a healthy life. And the better your health, the lower your health care costs are likely to be. Following these guidelines, along with the advice of your doctor, can help you stay healthy. Talk to your doctor about your specific health questions and concerns, and follow his or her recommendations.

For more information on preventive care, visit our online website at [www.uhcpreventivecare.com](http://www.uhcpreventivecare.com) to identify your age and gender-specific preventive care guidelines, based on recommendations of the U.S. Preventive Services Task Force and other health organizations. Use the charts inside this brochure, along with the recommendations provided on our website to talk with your doctor about the preventive health screenings that are right for you.

## Guidelines for maintaining your health

Screening: Children ages 0-18 years		
Age	Screening test	Frequency
<b>Newborn</b>	Newborn screening (PKU, sickle cell, hemoglobinopathies, hypothyroidism)	Once
	Hearing screening	Once
<b>Birth-2 months</b>	Head circumference	At each preventive visit
<b>Birth-18 years</b>	Height (length) and weight	At each preventive visit
<b>3-4 years</b>	Eye screening	Once
<b>6-8 years</b>	Obesity	At each preventive visit
<b>12-18 years</b>	Depression	At each preventive visit
Counseling: Children ages 0-18 years		
As your child grows, talk to their doctor about:		
<ul style="list-style-type: none"> <li>• Development</li> <li>• Dental and oral health</li> <li>• Child abuse</li> </ul>	<ul style="list-style-type: none"> <li>• Nutrition and eating disorders</li> <li>• Safety</li> <li>• Alcohol and drug abuse</li> </ul>	<ul style="list-style-type: none"> <li>• Physical activity</li> <li>• Tobacco use</li> </ul>

Range of recommended ages

Catch-up Immunization

Certain high-risk groups

## Recommended immunization schedule for persons aged 0 through 6 years – United States • 2010

For those who fall behind or start late, see the catch-up schedule

Vaccine	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	19-23 months	2-3 years	4-6 years
Hepatitis B <sup>1</sup>	HepB	HepB			HepB						
Rotavirus			RV	RV	RV <sup>2</sup>						
Diphtheria, Tetanus, Pertussis			DTaP	DTaP	DTaP	See footnote 3	DTaP				DTaP
Haemophilus influenzae type b			Hib	Hib	Hib	Hib					
Pneumococcal			PCV	PCV	PCV	PCV				PPSV	
Inactivated Poliovirus			IPV	IPV	IPV						IPV
Influenza					Influenza (yearly)						
Measles, Mumps, Rubella						MMR					MMR
Varicella						Varicella					Varicella
Hepatitis A						HepA (2 doses)				HepA Series	
Meningococcal										MCV4	

Source: Centers for Disease Control and Prevention Recommended immunization schedules for persons aged 0 through 18 years – United States, 2010; 58(51&52)

1. Administration of 4 doses of HepB to infants is permissible when combination vaccines containing HepB are administered after the birth dose.

2. If Rotarix® is administered at ages 2 and 4 months, a dose at 6 months is not indicated.

3. The fourth dose may be administered as early as age 12 months, provided at least 6 months have elapsed since the third dose.

## Recommended immunization schedule for persons aged 7 through 18 years – United States • 2010

For those who fall behind or start late, see the catch-up schedule

Vaccine	7-10 years	11-12 years	13-18 years
Tetanus, Diphtheria, Pertussis		Tdap	Tdap
Human Papillomavirus (covered for females; not for males)		HPV (3 doses)	HPV Series
Meningococcal	MCV	MCV	MCV
Influenza	Influenza (yearly)		
Pneumococcal	PPSV		
Hepatitis A	HepA Series		
Hepatitis B	HepB Series		
Inactivated Poliovirus	IPV Series		
Measles, Mumps, Rubella	MMR Series		
Varicella	Varicella Series		

SOURCE: Centers for Disease Control and Prevention, Recommended immunization schedules for persons aged 0 through 18 years – United States, 2010; 58(51&52)

## Preventive Care Guidelines: Adults over age 18

### Range of recommended ages

Years of Age	18	25	30	35	40	45	50	55	60	65	70
<b>Screenings</b>											
Height and weight	At each preventive visit to assess normal development and general health.										
Obesity	At each preventive visit to assess risks of obesity.										
Vision screening	Frequency recommended by physician based on risk factors to assess vision.										
Dental screening	Periodically to assess dental condition and detect medically related dental problems.										
Blood pressure	Regular screening for adults at standard risk.										
Cardiovascular disease											
Abdominal Aortic Aneurysm screening											Screening for abdominal aortic aneurysm in men 65-75 years old. For those at high risk for heart disease, discuss aspirin and low risk alternatives with your physician.
Cholesterol (Lipid) test											Every 5 years, beginning at age 35 for men and 45 for women. For those at high risk for heart disease, consult with your physician.
Diabetes screening											Regular screening of adults for type 2 diabetes in asymptomatic adults with sustained blood pressure (either treated or untreated) greater than 135/80 mm Hg.
Prostate screening											Men 40 and older consult with your physician regarding screening benefits/risks.
Colorectal screening											Routine Colorectal screening beginning at 50 years, high risk person should be screened at younger ages. Interval determined by method. Speak with your physician.
Mammography											Screening Mammography for all adult women of standard risk every one to two years beginning at age 40 or as directed by your physician. Women at defined high risk should be screened earlier. Discuss with your physician. For those at high risk, consult with your physician regarding breast cancer prevention alternatives with low risk of adverse effects.
Osteoporosis screening											Routine screening for women age 65 and older. Screening for post-menopausal women at defined high risk. Discuss with your physician.
Cervical cancer screening (Pap Smear)***	Every two years beginning at age 21 or for females who are sexually active, after 3 normal screenings, every 3 years or at a frequency recommended by physician based on risk factors.										
Sexually Transmitted Diseases (gonorrhea, HIV and syphilis)	Routine screening for those sexually active at increased risk. Routine screening for Chlamydia for females under 25. Syphilis screening recommended for ALL pregnant women.										
Screening for rubella, iron deficiency, urinary tract infection, Hepatitis B, blood type and RH(D) incompatibility screening	For pregnant Women at first pre-natal visit without prior screening, proof of immunization or immunity or at increased risk.										

continues ▶

Years of Age	18	25	30	35	40	45	50	55	60	65	70	
<b>Screenings</b>												
Folic Acid – recommended dosage is 0.4 - 0.8mg daily	Recommended for adult women of childbearing age beginning at age 18 who are considering pregnancy.											
Tobacco/nicotine use	Routine Screening and counseling. Detection of potential health risks associated with tobacco/Nicotine use. Opportunity for tobacco cessation counseling.											
Alcohol/illicit drug abuse	Routine screening and counseling. Detection of potential health risks associated with Alcohol/Illicit drug abuse.											
<b>Counseling</b>	18	25	30	35	40	45	50	55	60	65	70	
Promote and support breast feeding and post-partum counseling	Women after childbirth.											
Nutrition, physical activity, sun exposure, depression and injury prevention	Periodic screening and counseling.											
<b>Immunizations</b>	18	25	30	35	40	45	50	55	60	65	70	
Human Papilloma virus vaccine	3 does may be administered to females age 9–26 with physician discretion.											
Tetanus-Diphtheria (Td/Tdap) vaccine	Every 10 years for adults who have completed the primary series and if the last vaccine was received 10 or more years ago, substitute for a single booster of Td.											
Measles, Mumps, Rubella (MMR) vaccine	Once for all with lack of immunity. Adults born before 1957 are generally considered to be immune to measles and mumps so would not require vaccination. Those born after 1957 may need a 2nd dose. Consult with your health care provider.											
Varicella (VZV) vaccine	Two doses for those susceptible with lack of immunity. Susceptibles: People 13 and older who have not received the vaccine and have not had chickenpox.											
Hepatitis B vaccine	Three doses for all persons at risk and pregnant women at first prenatal visit. Discuss with your physician.											
Hepatitis A vaccine	For all persons at risk. Discuss with your physician.											
Influenza vaccine	Annually. Speak with your physician to learn if you are in a priority group. Effective with the 2010-2011 flu season, immunization against seasonal and H1N1 flu will be done with a single vaccine.											
Meningococcal vaccine	One or more doses for Individuals at high risk.** Discuss with your physician.											
Pneumococcal Polysaccharide vaccine (PPV)											One or two doses for individuals at high risk for complications of infection.*** Discuss with your physician.	
Zoster											One dose between ages 60-75.	

### Upper age limits should be individualized for each patient

\* See [www.preventiveservices.ahrq.gov](http://www.preventiveservices.ahrq.gov) for U.S. Preventive Services Task Force recommendations on colorectal cancer screening and other clinical preventive services.

\*\* High risk is defined as adults who have terminal complement deficiencies, had their spleen removed, their spleen does not function or they have medical, occupation, lifestyle or other indications such as college freshmen living in dormitory or other group living conditions.

\*\*\* For persons aged 65 and older, one time revaccination is recommended if they were vaccinated more than 5 years previously and were younger than age 65 years at the time of primary vaccination.

\*\*\* ACOG, "Cervical Cytology Screening" Obstetrics & Gynecology; Practice Bulletin #109; 12/09



These guidelines are generally based on the recommendations of the U.S. Preventive Services Task Force (USPSTF) and of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention. They are provided for informational purposes only, and do not constitute medical advice. Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions. Always consult your doctor before making any decisions about medical care. These guidelines do not necessarily reflect the vaccines, screenings or tests that will be covered by your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on the back of your ID card. Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by UnitedHealthcare Insurance Company, United HealthCare Services, Inc. or their affiliates. Health Plan coverage provided by or through a UnitedHealthcare company.