



Balance Women's Health Preventative Care Recommendations

Prevention is the key to better quality of life and improved healthcare outcomes. At Balance, we strive to ensure our patients are informed about their health care needs. Here we have provided a compilation of our recommendations to keep you up-to-date. If we do not offer to refer or order these for you, please address with your provider and/or your primary care physician or OB/GYN.

Well Women Exam

Performed annually and includes the following:

- General physical exam of the head/neck, heart, lungs, abdomen, skin, and pelvic region
- Breast exam
- Bimanual pelvic and speculum exam
- Cervical Cancer screening (PAP smear and HPV testing)
- STI testing (if risk factors present)
- Occult stool testing (ages over 50 or with strong family history of colon cancer)

Cervical Cancer Prevention Guidelines per ACOG

Most cases of cervical cancer are caused by HPV infection. It usually takes 3–7 years for changes in cells to become cancer. Screening may detect changes before they become cancer. A PAP smear and HPV testing are the best tools to find possible infection and cancerous cells.

Guidelines for Screening:

- Women aged 21–29 years should have a Pap test alone every 3 years. HPV testing is not recommended.
- Women aged 30–65 years should have a Pap test and HPV test (co-testing) every 5 years (preferred). It also is acceptable to have a Pap test alone every 3 years.

Cervical Cancer cont.

You should stop having cervical cancer screening after age 65 years if you do not have a history of abnormal cervical cells or cancer, and you have had 3 negative Pap test in a row or 2 negative co-test in a row within 10 years, with the most recent test performed within the past 5 years.

If you have had a hysterectomy, you still may need screening and the decision is based on whether your cervix was removed, why a hysterectomy was needed, and whether you have a history of cervical cell changes or cancer.

Sexually Transmitted Infection (STI) testing recommendations per CDC

- Gonorrhea and Chlamydia: Sexually active women under 25 years old or older if at increased risk
- Herpes: Any women presenting for STI evaluation, especially women with multiple partners.
- HIV: All women aged 13-64 years or women who seek evaluation and treatment for STDs
- Hepatitis: Women born between 1945-1965 (C) or women with risk factors or presenting for STI evaluation (B/C)
- Pregnant Females: All should be tested at initial prenatal visit for gonorrhea, chlamydia, syphilis, HIV, and Hepatitis B.

Breast Cancer Screening Tests and Guidelines per ACOG

Breast Self-Exams

- Our office recommends daily breast checks with simply washing in the shower with hand washing the chest with soap and water. If any changes are identified, contact the office to schedule a clinical exam.

Breast Clinical-Exam Guidelines per ACOG

- Clinical Breast Exam recommended annually for women aged 19 or older.

Mammogram

- Mammography is a low-dose x-ray used to create detailed images of the breast and is currently the best available method to detect breast cancer early, when treatment is most effective.
- Guidelines per ACOG
 - Screening mammography every year for women aged 40-75
 - Diagnostic mammography performed in symptomatic women (IE: breast lump or abnormality found during screening mammography)

Osteoporosis Screening Guidelines

Prevention Recommendations

- Adequate calcium (1000 to 1200 mg daily) & vitamin D (400 to 800 IU daily) with dietary intake or supplementation if needed.
- Regular weight-bearing and muscle-strengthening exercise
- Smoking cessation
- Moderation of alcohol intake
- Fall-prevention strategies

Screening Guidelines & Tests

- DEXA or bone density scan is recommended for those who are 65 years and older, as well as younger, postmenopausal women at higher risk for osteoporosis – such as women who have low body weight, who smoke cigarettes, or whose parent has broken a hip.

Colorectal Cancer Screening Guidelines

The American Cancer Society recommends that people at average risk* of colorectal cancer start regular screening at age 45. This can be done either with a sensitive test that looks for signs of cancer in a person's stool, or with an exam that looks at the colon and rectum.

- * People are considered to be at average risk if they **do not** have:
 - A personal history of colorectal cancer or certain types of polyps
 - A family history of colorectal cancer
 - A personal history of inflammatory bowel disease
 - A confirmed or suspected colorectal cancer syndrome
 - A personal history of getting radiation to the belly or pelvic area to treat a prior cancer

People at increased or high risk of colorectal cancer might need to start colorectal cancer screening before age 45, be screened more often, and/or get specific tests. This includes people with the issues listed above.

References

- 1) <https://www.acog.org/About-ACOG/News-Room/Statements/2015/ACOG-Statement-on-Recommendations-on-Breast-Cancer-Screening>
- 2) <https://www.cancer.org/cancer/colon-rectal-cancer/detection-diagnosis-staging/acs-recommendations.html>
- 3) <https://www.acog.org/Patients/FAQs/Cervical-Cancer-Screening>
- 4) <https://www.medscape.com/viewarticle/898590>
- 5) <https://www.cdc.gov/std/tg2015/screening-recommendations.htm>
- 6) <https://www.aafp.org/afp/2004/0315/p1558.html>