

PREVENTIVE

An ounce of prevention leads to a lifetime of good health.

From immunizations and routine check-ups to certain tests and screenings, routine preventive care is important. These charts reflect the preventive care guidelines supported by the medical community and Blue Cross and Blue Shield of Kansas City (Blue KC). Please note the guidelines set forth by the Centers for Disease Control and Prevention are updated periodically. Refer to <u>cdc.gov/vaccines</u> to access the most up to date immunization schedules.



Pregnancy - Prenatal/Post	partum Resources	For pregnancy resources and support, enroll in our Little Stars® prenatal care program. Call 816-395-3964 or toll free 1-800-892-6116, ext. 3964.						
First Visit	Prior to 14 weeks	Call 816-395-3964 or toll free 1-800-8	92-6116, ext. 3964.					
Prenatal Visits	Monthly visits, 28 - 30 weeks	Biweekly visits up to 36 weeks	Weekly visits after 36 weeks, until delivery					
Postpartum Visits	Within 6 weeks from giving birth							

Babies & Children				I	Babies	: Birtł	n - 24 n	nonth	5					Chil	dren: 3	8 - 10 y	ears						
		Birth	1	2	4	6 9 12 15 18 24				3	4	5	6	7	8	9	10						
	Well Child Exam	•	•	•	•	•	•	•	•	•	•	• • • • Every 1 - 2 ye						- 2 years					
Tests / Exams	Lead Risk Assessment/Testing 1							•			•												
	Blood Pressure											Regularly, as recommended by child's doctor											
	Anemia Screening						recommen child's doc																
	Hepatitis B (HepB)	HepB #1	Нер	B#2				B#3, one tir nded by chi	me as ild's doctor														
	Rotavirus (RV)			R	IV																		
suoi	Diphtheria, Tetanus, Pertussis (DTaP)			DTaP	DTaP	DTaP			DTaP					DTaP									
Immunizations	Haemophilus Influenza (Hib) 2				Hib				Hib														
Immi	Pneumococcal Conjugate (PCV13)			PC\	/13				PCV13														
	Polio (IPV)			IP	v									IPV									
	Measles, Mumps, Rubella (MMR)							MMR						MMR									
	Chicken Pox (Var)							Var					Var										
	Hepatitis A (HepA) 3								НерА														
	Influenza							Annually	r (IIV only)			Annually (IIV or LAIV)											

¹ Lead exposure risk assessment starting at 6 months. Blood Lead levels at 12 months and 24 months. Certain geographic regions may pose a greater risk to your child. Talk to your doctor to determine if additional testing is appropriate for your child through age 6.

² Some vaccine series require only 3 doses.

³ Administer two doses at least six months apart. Children not fully vaccinated by age two years can be vaccinated at subsequent visits. Hepatitis A is recommended for older children who live in areas where vaccination programs target older children, who are at increased risk for infection, or for whom immunity against Hepatitis A is desired.

Preventive services are covered by most health plans. Deductibles and copays may apply. Please refer to your health plan contract for your specific healthcare coverage.

Teens & Adults				Tee	ens: 11	- 18 ye	ars				Adults: 19 - 65+ years												
Iec	ans & Adults	11	12	13	14	15	16	17	18	19	20	21-25	30	35	40	45	50	55	60	65+			
Exams	Physical Exam - Height, Weight, Blood Pressure and Skin Cancer Screen	Every 1 - 2 years																					
	Blood Pressure								Regul	arly, as	recom	mended by your	doctor										
	Self Breast Exam									Monthly													
	Cholesterol Routine Screening									Every 1 - 5 years													
	Diabetes Screening 1														Annually								
Tests	Women – Mammogram⁵														Every 1-2 years, ages 40-74								
	Women – Pelvic Exam/Pap Test											E	very 3 -	- 5 year	s, as re	ecomme	nded b	y your	doctor				
	Colon Cancer Screening ²																						
	Stool Occult Blood															Annually							
	Sigmoidoscopy												Every 5 years										
	Colonoscopy										Every 10 years												
	Thyroid Stimulating Hormone (TSH)																			Age 65			
	Diphtheria, Tetanus (Td/Tdap) ³	1	Гdap										Every 10 years										
	Meningococcal (MenACWY)	MenACWY					Booster																
zations	HPV Females 4 and Males ⁴	HPV	(3 doses)							(if no		3 doses) ved as a child)											
Immunizations	Pneumococcal (PCV13 and PPSV23)																			1 dose			
	Shingles										2 doses												
	Influenza										An	nually											

These guidelines are based on recommendations from the following: U.S. Preventive Services Task Force, American Cancer Society, U.S. Centers for Disease Control, American Academy of Pediatrics, American Academy of Family Physicians and the American College of Obstetricians and Gynecologists, 2010.

1 For higher-risk individuals (those with high blood pressure, elevated cholesterol, coronary artery disease or who are obese/overweight, earlier screening may be necessary).

2 For those with family history of colorectal cancer, screening should begin by age 40.

3 Substitute one-time dose of Tdap for Td booster. Boost with Td every 10 years.

4 A complete series consists of three doses. The second dose two months after first, the third six months after first, if you did not receive the 3-shot series as a child. If receiving as an adult male, three doses should be administered between the ages of 19-21.

5 Screening for breast cancer by mammography in average-risk women no earlier than 40 and no later than 50. Screening mammography should occur at least biennially and as frequently as annually.

For more information on prevention and wellness, visit our website at **BlueKC.com**.