

# Screenings by age



These guidelines show which routine tests and screenings you may need to begin at each age, and how often they should be repeated.

Always consult your health care provider for a schedule personalized to your health needs and risk factors.

## all adults

**PHYSICAL WITH BMI/BLOOD PRESSURE SCREENING:** annually  
**EYE EXAM:** annually  
**DENTAL CHECKUP:** every 6 months  
**FLU SHOT:** annually for those 6 months or older  
**DIPHTHERIA/TETANUS VACCINE:** every 10 years, up to age 65



### men



### women

## 20s

**TESTICULAR EXAM:**  
annually

**HEARING TEST:**  
every 10 years  
**LIPID PANEL/ CHOLESTEROL TEST:**  
every 5 years  
**SKIN CANCER EXAM:**  
every 3 years

**OB-GYN APPOINTMENT:**  
annually  
**PAP TEST:**  
every 3 years

## 30s

**CARDIOVASCULAR BLOOD TESTS RISK:**  
depending on risk factors

**BLOOD GLUCOSE TEST:**  
every 5 years  
**LIPID PANEL/ CHOLESTEROL TEST:**  
annually at 35 years

**THYROID STIMULATING HORMONE (TSH) TEST:**  
every 5 years at 35 years  
**PAP TEST:**  
every 5 years

## 40s

**PROSTATE CANCER SCREENING:**  
if high risk  
**PROSTATE DIGITAL RECTAL EXAM:**  
if high risk

**PREDIABETES SCREENING:**  
every 3 years at 45 years

**MAMMOGRAPHY:**  
annually  
**PHYSICAL BREAST EXAM:**  
annually  
**COLON CANCER SCREENING:**  
if high risk at 45 years

## 50s

**PROSTATE DIGITAL RECTAL EXAM:**  
annually

**FECAL OCCULT BLOOD TEST:**  
annually  
**SCREENING COLONOSCOPY:**  
every 10 years  
**HEARING EXAM:**  
annually

**OSTEOPOROSIS EXAM:**  
depending on risk factors

## 60s

**SHINGLES/VARICELLA ZOSTER VACCINE:**  
once

**PNEUMONIA VACCINE:**  
once

**BONE MINERAL DENSITY/ OSTEOPOROSIS EXAM**

## 70s

**ASK DOCTOR ABOUT CEASING COLON CANCER TESTS**

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