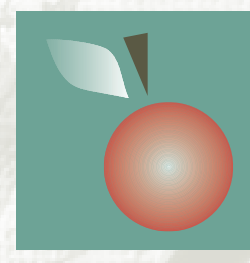


N.H. Prevention Guidelines

Effective April 1, 2006–March 31, 2008



Foundation for
Healthy Communities

Developed by New Hampshire Health Plan Medical Directors and the Department of Health & Human Services

ROUTINE PHYSICALS	RECOMMENDED SCHEDULE
AGES 0–18 MONTHS	Birth, 1, 2, 4, 6, 9, 12, 15, 18 months
AGES 2–18 YEARS	Annually: ages 2–5 years and 11–18 years. Every 2 years: ages 6–10 years
AGES 19–39 YEARS	Every 3–5 years
AGES 40–49 YEARS	Every 2 years
AGES 50+ YEARS	Annually

RECOMMENDED DIAGNOSTIC SCREENINGS	RECOMMENDED SCHEDULE
Breast Cancer	Beginning at age 40, screening mammography every 1–2 years; beginning at developmentally appropriate age, discuss the risks and benefits of clinical and self breast exam ^{*6,3}
Cervical Cancer	Pap smear within 3 years of onset of sexual activity or age 21 (whichever comes first) and at least every 3 years ^{*6}
Colorectal Cancer	Beginning at age 50, screening options include one and/or a combination of the following: annual home fecal occult blood testing (FOBT), sigmoidoscopy every 5 years, double contrast barium enema every 5 years, colonoscopy every 10 years ^{*6,3}
Prostate Cancer	Beginning at age 50, discuss the risks and benefits of Digital Rectal Exam (DRE) and Prostate Specific Antigen (PSA) ^{*3}
Chlamydia	Annually for sexually active women under the age of 26 ^{*6}
Osteoporosis	Beginning at age 65, routine screening for women; beginning at age 60, routine screening for women at risk for osteoporotic fractures ^{*6}
Obesity	Routinely screen adults and children for obesity using Body Mass Index (BMI) and offer intensive counseling and behavioral interventions to promote sustained weight loss for obese adults and children ^{*6,2}
Cholesterol (lipids)	Routinely screen men aged 35 years and older and women aged 45 years and older ^{*6}
Lead	Blood test at 1 and 2 years of age, based on community or individual risk ^{**}
Vision	Screen in children younger than age 5 years to detect amblyopia and strabismus, and defects in visual activity ^{*6}
Oral Health	Beginning at age 6 mos., prescribe oral fluoride supplementation at currently recommended doses after screening water source ^{***} ; at age 1 year, referral to dentist ^{*6,2}
Depression	Screening as part of preventive care ^{*6}
Tobacco, Alcohol, and Injury Prevention Screening and Counseling	Part of all routine preventive care ^{*6}

Screening frequency may vary with patient characteristics, such as family history and other risk factors.

* See Sources Below

** Per N.H. Childhood Lead Screening Guidelines, 2004.

*** MMWR 2001.

Recommended Immunization Schedule

Vaccines are listed under the routinely recommended ages. **Red Boxes** indicate range of acceptable ages for vaccinations.

Grey Boxes indicate catch-up vaccinations: at 24 months–18 years of age. Varicella Virus vaccine and Measles, Mumps, Rubella vaccine should be administered to individuals who lack evidence of immunity or prior infection.

VACCINES	AGE														
	Birth	1 mo.	2 mo.	4 mo.	6 mo.	12 mo.	15 mo.	18 mo.	23 mo.	24 mo.	4–6 yrs.	11–12 yrs.	13–18 yrs.	50 yrs.	65+ yrs.
HEPATITIS A						Hep A Series				Hep A Series					
HEPATITIS B	HepB	Hep B	Hep B <small>(only if combination vaccine is used)</small>		Hep B					Hep B Series					
DIPHTHERIA, TETANUS, PERTUSSIS			DTaP	DTaP	DTaP		DTaP				DTaP	Tdap	Tdap		Td every 10 years from 18 yrs.
H. INFLUENZA TYPE B			Hib	Hib	Hib	Hib									
PNEUMOCOCCAL CONJUGATE (PCV)			PCV	PCV	PCV	PCV									
INACTIVATED POLIOVIRUS			IPV	IPV	IPV						IPV				
MEASLES, MUMPS, RUBELLA						MMR					MMR	MMR			
VARICELLA						Var					Var				
MENINGOCOCCAL												MCV4	MCV4 at 15 yrs.		
PNEUMOCOCCAL VACCINE (PPV)															One life-time dose
INFLUENZA						Influenza									Yearly

* SOURCES:

- American Academy of Family Physicians (AAFP)
- American Academy of Pediatrics (AAP)
- American Cancer Society (ACS)
- Advisory Committee on Immunization Practices (ACIP)
- Center for Disease Control and Prevention (CDC)
- United States Preventive Services Task Force (USPSTF)

