

**Blue Cross of California
Preventive Screening and Immunizations Recommendations for
Healthy Children, Adolescents, Adults, Seniors and Pregnancy
2005**

Blue Cross of California

Recommendations for Preventive
Screening, Immunizations and Counseling
For Blue Cross of California Members

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Ages 0 – 2 Years	
Screening/Immunization	Frequency
Height, weight, hearing	To be performed.
Lead screening	At 9-12 months and 24 months in accordance with state law.
PKU	After birth, prior to discharge
Hematocrit, for anemia or polycythemia	At 6-12 months and 15 months. 5 years for high risk for iron deficiency
Ocularprophylaxis	After birth, no later than 1 hour.
DTaP (diphtheria, tetanus, acellular pertussis)	At 2, 4, 6, 15 – 18 months.
IPV (inactivated polio virus)	At 2, 4, 6 –18 months.
MMR (measles, mumps, rubella)	At 12 – 15 months.
Hib	At 2, 4, 6, 12 – 15 months.
Hepatitis B	At birth – 2 months At 1-4 months (1 – 2 months after first dose) And at 6 – 18 months (preferably at least 4 months after 2 nd dose)
Hepatitis A	24 months – 12 years (2 doses, the second administered 6 – 18 months after the first)
Pneumococcal Conjugate (Prevnar)	2, 4, 6 months, booster 12 – 15 months
Varicella (chicken pox)	At 12 – 18 months (once, for healthy children who have not had a history of varicella infection)
Influenza immunization	Annually, each fall season, for healthy children 6-24 months of age, at risk individuals and those wishing to obtain immunity.
Additional Recommendations	
Breast feeding infants – follow-up after discharge – 48 ~ 72 hours after birth.	
Congenital hypothyroidism – After birth, optimally between 2 – 6 days.	
Screening to detect amblyopia, strabismus, and defects in visual acuity	
TB Screening – To be performed for high risk population. Discuss risk with physician.	
Hemoglobinopathy – Discuss risk with physician.	
Counseling: Nutrition, Injury Prevention, Dental Health	

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Ages 3 – 11 Years	
Screening/Immunization	Frequency
Height, weight, blood pressure, hearing and vision	To be performed.
Hematocrit, for anemia or polycythemia	At 5 years for high risk for iron deficiency
DTaP (diphtheria, tetanus, acellular pertussis)	At 4 – 6 years.
IPV (inactive polio virus)	At 4 – 6 years.
Hepatitis A	2 – 12 years (2 doses, the second administered 6 – 18 months after the first)
Varicella (chicken pox)	At 12 – 18 months (once, for healthy children who have not had a history of varicella infection)
MMR (measles, mumps, rubella)	At 4 – 6 years
Influenza	Annually, each fall season, for at risk individuals and those wishing to obtain immunity.
Pneumococcal Conjugate (Prevnar)	2 – 5 years for high risk children or if not previously vaccinated. 5 – 54 years with cochlear implants should receive PPV23 according to schedule used for persons with chronic illnesses. Two weeks prior to cochlear implants for those not immunized.
Meningococcal vaccine	A single dose of MCV4 is recommended at age 11-12 years.
Additional Recommendations	
TB Screening – To be performed for high risk population. Discuss risk with physician.	
Screening to detect amblyopia, strabismus, and defects in visual acuity (under age 5 years)	
Counseling: Nutrition, Exercise, Healthy Weight, Injury Prevention, Substance Avoidance (Tobacco, Alcohol, Drugs), Dental Health.	

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Ages 12 – 19 Years	
Screening/Immunization	Frequency
Height, weight, blood pressure (18 and older), hearing and vision.	To be performed.
Pap Test (females at age 18 or earlier if sexually active past or present and if cervix is present)	Annually, until two consecutive negative tests, then every 3 years.
Chlamydia screening (all sexually active females < 25 years and other asymptomatic women at increased risk for infection)	To be performed.
Gonorrhea screening	For women age < 25 or at increased risk.
Syphilis screening	Persons at increased risk for infection.
HIV screening	All adolescents at increased risk
Rubella serology or vaccination (for women of childbearing age, without proof of immunization/immunity)	Once
Td booster (tetanus, diphtheria)	At 11 – 16 years
MMR (measles, mumps, rubella) (if no previous 2 nd dose)	At 11 – 12 years
Varicella (chicken pox) (for adolescents without proof of immunization or immunity)	At 11 – 12 years
Hepatitis B (if not previously vaccinated)	At current visit, then next dose at 1 and 6 months.
Influenza	Annually each fall season, for at risk individuals and those wishing to obtain immunity.
Hepatitis A	To be performed at 12 – 18 years for high risk only.
Pneumococcal vaccine	5 – 54 years with cochlear implants should receive PPV23 according to schedule used for persons with chronic illnesses. Two weeks prior to cochlear implants for those not immunized.
Meningococcal vaccine	A single dose of MCV4 is recommended at age 11-12 years or at high school entry (approximately at age 15 years) or at increased risk.
Additional Recommendations	
Preconception counseling.	
Counseling on sexually transmitted disease, HIV and birth control	
TB Screening – To be performed for high risk population. Discuss risk with physician.	
Counseling	

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Nutrition, Exercise, Healthy Weight, Injury Prevention, Substance Avoidance (Tobacco, Alcohol, Drugs), Sexual Behavior (Conception, Sexually Transmitted Diseases, HIV Preventive Education), Dental Health, Mental Health (Depression)

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Ages 20 – 39 Years	
Screening/Immunization	Frequency
Height and Weight	To be performed
Blood Pressure	At least every 2 years
Pap Test	Annually, until 2 consecutive negative tests, then at least every 3 years.
Total cholesterol and HDL cholesterol test Men age 20 – 35 and women age 20 – 45 Men age 35 and older and women age 45 and older	Discuss risk with physician. Discuss frequency and testing options with physician but at least every 5 years.
Chlamydia screening (for women at high risk) Age < 25 Age > 25	Regularly. Periodically.
Gonorrhea screening	For women age < 25 or at increased risk.
Syphilis screening	Persons at increased risk for infection.
HIV screening	All adults at increased risk
Rubella serology or vaccination (for women of childbearing years without proof of immunization/immunity)	Once
Varicella (chicken pox)	High risk – 2 doses, 4 – 8 weeks apart
Td booster (tetanus, diphtheria)	Once every 10 years
MMR (measles, mumps, rubella) (for those without proof of immunity or if no previous 2 nd dose).	Once.
Influenza (for high risk individuals)	Annually, each fall season
Hepatitis A (for high risk individuals)	2 doses, second dose 6 months after first
Hepatitis B (for high risk individuals)	At current visit, then next dose at 1 and 6 months.
Pneumococcal vaccine	5 – 54 years with cochlear implants should receive PPV23 according to schedule used for persons with chronic illnesses. Two weeks prior to cochlear implants for those not immunized.
Meningococcal vaccine	A single dose of MCV4 is recommended for at risk groups age 20 – 55 years.
Additional Recommendations	
Women should discuss with their physician about taking 400 micrograms of folic acid to decrease the risk for fetal birth defects of the brain or spine.	
Men should discuss testicular self-examination with physician.	
TB Screening – To be performed for high risk population. Discuss risk with physician.	
Women should discuss preconception planning with physician.	
Women should discuss the risk factors for osteoporosis with physician.	

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Counseling
Nutrition, Exercise, Injury Prevention, Substance Avoidance, Sexual Behavior (Conception, Sexually Transmitted Diseases), Dental Health, Mental Health (Depression),
Patients with hyperlipidemia and other known risk factors for cardiovascular disease should have intensive behavioral dietary counseling.
Screen all adults for tobacco use and provide tobacco cessation interventions for those who use tobacco products.

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Ages 40 – 64 Years	
Screening/Immunization	Frequency
Height and Weight	To be performed
Blood Pressure	At least every 2 years
Pap Test	Annually, until 2 consecutive negative tests, then at least every 3 years.
Total cholesterol and HDL cholesterol test Women age 20 – 45 Men age 35 and older and women age 45 and older	Discuss risk with physician. Discuss frequency and testing options with physician but at least every 5 years.
Mammography screening with or without clinical breast examination for women age 40 and older.	Every 1 – 2 years.
Colorectal Screening (≥ age 50): Fecal Occult Blood Test (FOBT) Or Flexible Sigmoidoscopy Or Colonoscopy (beginning at age 45 for African Americans) Or Double Contrast Barium Enema	Annually. Every 5 years. Every 10 years. Every 5 years.
Gonorrhea screening	For women age < 25 or at increased risk.
Syphilis screening	Persons at increased risk for infection.
HIV screening	All adults at increased risk
Rubella serology or vaccination (for women of childbearing years without proof of immunization/immunity)	Once.
Varicella (chicken pox)	High risk – 2 doses, 4 – 8 weeks apart.
Td booster (tetanus, diphtheria)	Once every 10 years.
MMR (measles, mumps, rubella) (for those without proof of immunity or if no previous 2 nd dose).	Once.
Influenza (≥ age 50 and for high risk individuals)	Annually, each fall season.
Hepatitis A (for high risk individuals)	2 doses – second dose 6 months after first
Hepatitis B (for high risk individuals)	At current visit, then next dose at 1 and 6 months.
Pneumococcal vaccine	5 – 54 years with cochlear implants should receive PPV23 according to schedule used for persons with chronic illnesses. Two weeks prior to cochlear implants for those not immunized.
Meningococcal vaccine	A single dose of MCV4 is recommended for at risk groups age 20 – 55 years. For at risk groups age > 55 years use

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	MPSV4.
Additional Recommendations	
Women and their physician should discuss the balance of risks and benefits before deciding to initiate or continue hormone therapy for menopausal symptoms.	
Women should discuss with their physician about taking 400 micrograms of folic acid to decrease the risk for fetal birth defects of the brain or spine.	
Osteoporosis Screening – Begin at age 60 for women at increased risk for osteoporotic fractures	
TB Screening – To be performed for high risk population. Discuss risk with physician.	
Women should discuss preconception planning with physician.	
Counseling	
Women should discuss the risk factors for osteoporosis with physician.	
Discuss risk factors for stroke and coronary artery disease for prevention with physician.	
Men should discuss the known risks and benefits of prostate cancer screening with physician. African American men are at risk.	
Patients with hyperlipidemia and other known risk factors for cardiovascular disease should have intensive behavioral dietary counseling.	
Adults at increase risk for coronary artery disease should discuss with physician the use of aspirin chemoprevention.	
Nutrition, Exercise, Injury Prevention, Substance Avoidance, Sexually Transmitted Diseases, Hormone Replacement Therapy, Dental Health, Mental Health (Depression).	

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Ages 65 and Older	
Screening/Immunization	Frequency
Height, weight, vision and hearing	Every 1-2 years
Blood Pressure	Every 1- 2 years
Abdominal aortic aneurysm by ultrasonography in men aged 65 to 75 who have ever smoked	One time
Pap Test	Discuss frequency with physician.
Total cholesterol and HDL cholesterol test	Discuss frequency and testing options with your physician but at least every 5 years.
Mammography screening with or without clinical breast examination for women age 40 and older	Every 1 – 2 years. Discuss with your physician after age 75.
Colorectal cancer screening (\geq age 50): Fecal Occult Blood Test (FOBT) Or Flexible Sigmoidoscopy Or Colonoscopy (beginning at age 45 for African Americans) Or Double Contrast Barium Enema	Annually. Every 5 years. Every 10 years. Every 5 years.
TB Screening	High risk – To be performed based on risk
Varicella (chicken pox)	High risk – 2 doses, 4 – 8 weeks apart.
Td booster (tetanus, diphtheria)	Once every 10 years.
Pneumococcal	Once, booster may be required.
Influenza	Annually, each fall season.
Hepatitis A (for high risk individuals)	2 doses – second dose 6 months after first
Hepatitis B (for high risk individuals)	At current visit, then at 1 and 6 months.
Osteoporosis screening	Routinely.
Counseling	
Men should discuss the know risks and benefits of prostate cancer screening with their physician.	
Women and their physician should discuss the balance of risks and benefits before deciding to initiate or continue hormone therapy for menopausal symptoms.	
Women should discuss the risk factors for osteoporosis with physician.	
Discuss risk factors for stroke and coronary artery disease for prevention with physician.	
Assess cardiovascular disease risk and discuss aspirin therapy periodically to prevent CVD events.	
Nutrition, Physical Activity, Injury Prevention, Substance Avoidance, Sexually Transmitted Diseases, Medication Use, Hormone Replacement Therapy, Dental Health, Mental Health (Depression), Sun Exposure, Tobacco Cessation.	

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Pregnancy	
Screening/Immunization	Frequency
Weight	Discuss with Physician
Blood Pressure	Initial visit, and all follow-up visits.
Hematocrit	First visit.
Urine culture or urinalysis for bacteria	First visit.
Hepatitis B surface antigen (HbsAg)	First visit.
RPR/VDRL	First visit.
History of genital herpetic lesions	Discuss with physician.
Chlamydia screening	
Age < 25	To be performed.
Age > 25 (high risk)	To be performed.
Syphilis infection screening	To be performed.
Rubella serology	First visit.
Vaccination history (general)	First visit.
Rh (D) blood typing and antibody testing	First visit.
HIV counseling and screening	To be performed
Chorionic villus screening (CVS) and/or amniocentesis and counseling ≥ age 35.	< 13 weeks (upon member's consent) 15 – 18 weeks (upon member's consent)
Multiple marker test	To be performed (upon member's consent)
Alpha Feto-protein	To be performed (upon member's consent)
Glucose tolerance test GDM screening	To be performed according to ACOG and American Diabetes Association recommendations.
Gonorrhea culture	To be performed – high risk population according to ACOG.
Group B streptococcal bacteria	At initial visit and last trimester.
Ultrasonography	To be performed – high risk population.
Influenza vaccination	To be performed on women who will be pregnant during influenza season. Can occur during any trimester.
Asymptomatic bacteriuria screening using urine culture	To be performed at 12-16 weeks' gestation.
Prenatal care	To be performed.
Postpartum visit	To be performed. Discuss with physician.
Additional recommendations	
Discuss with physician about taking 400 micrograms of folic acid to decrease the risk for fetal birth defects of the brain or spine. Structured breastfeeding education and behavioral counseling programs to promote breastfeeding. Screen all pregnant women for tobacco use and provide augmented pregnancy-tailored counseling to those who smoke.	

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References

Blue Cross of California recognizes that preventive services span a broad range of care for people of all ages. Several national organizations produce evidence-based guidelines for these services. While generally current, they are not all identical in their recommendations. Blue Cross of California recognizes as **MEDICALLY NECESSARY** the following lists of recommended preventive health guidelines:

Preventive Health Care References for Healthy Members

Maternity

American Academy of Family Physicians. Management of Maternity Care. MOM Care Program. www.aafp.org/momcare/index.html

Centers for Disease Control. Recommendations for the Use of Folic Acid to Reduce the Number of Cases of Spina Bifida and other Neural Tube Defects. *MMWR* 41(RR-14):001, 1992.

Center for Disease Control. Prevention of Perinatal Group B Streptococcal Disease: A Public Health Perspective. *MMWR* 45(RR-7):1-24, 1996.

American Academy of Pediatrics & American College of Obstetricians and Gynecologists. Guidelines for Perinatal Care (4th ed.). Elk Grove Village, Ill. 1997.

American College of Obstetricians and Gynecologists. Immunization During Pregnancy (Technical Bulletin No. 160). *Int J Gynecol Obstet* 40:49-79, 1993.

U.S. Preventive Services Task Force (USPSTF). Screening for Human Immunodeficiency Virus Infection. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2005 July.

The Guide to Clinical Preventive Services, 2005, U.S. Preventive Services Taskforce.

Guidelines for Perinatal Care, American College of Obstetricians, 4th Edition (1997).

Institute for Clinical Systems Improvement. (2000, July) Health Care Guidelines: Preventive Services for Adults. <http://www.icsi.org>

U.S. Preventive Services Task Force (USPSTF). Screening for asymptomatic bacteriuria: recommendation statement. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2004 Feb. 5

U.S. Preventive Services Task Force (USPSTF). Screening for hepatitis B virus infection: recommendation statement. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2004 Feb. 4

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U.S. Preventive Services Task Force (USPSTF). Screening for Rh(D) incompatibility: recommendation statement. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2004 Feb. 4

U.S. Preventive Services Task Force (USPSTF). Screening for Syphilis Infection. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2004 July 4.

Centers for Disease Control and Prevention (2004, May). Prevention and Control of Influenza: Recommendations of the Advisory Committee on Immunization Practices (ACIP) 53 (RR-6) *MMWR Recommendations and Reports*.
<http://www.cdc.gov/mmwrPDF/rr/rr5306.pdf>.

0-2 years

Centers for Disease Control and Prevention (2000, October). Preventing Pneumococcal Disease Among Infants and Young Children: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR Weekly*.
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr4909a1.htm> .

American Academy of Pediatrics Policy Statement. (1998, January). Tobacco, Alcohol, and Other Drugs: The Role of the Pediatrician in Prevention and Management of Substance Abuse (RE9801). *Pediatrics*101 (1):125-128.
<http://www.aap.org/policy/re9801.html> .

The Guide to Clinical Preventive Services, 2005, U.S. Preventive Services Taskforce 2005.

American Academy of Pediatrics Nutrition Handbook (1998).

American Academy of Family Physicians. "Age Charts for Periodic Health Examinations" December 2001. <http://www.aafp.org/exam>

American Academy of Pediatrics. Eye examination in infants, children, and young adults by pediatricians. *Pediatrics* 2003 Apr;111(4 Pt 1):902-7.

Updated recommendations on the use of pneumococcal conjugate vaccine: suspension of recommendation for third and fourth dose. *MMWR Morb Mortal Wkly Rep* 2004 Mar 5;53(8):177-8.

U.S. Preventive Services Task Force (USPSTF). Screening for visual impairment in children younger than age 5 years: recommendation statement. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2004. 11 p.

Recommended Childhood and Adolescent Immunization Schedule --- United States, 2005 (ACIP). American Academy of Family Physicians (AAFP) and the American Academy of Pediatrics (AAP), *MMWR*. 2005; 53: No. 51 & 52.

Blue Cross of California
Preventive Screening and Immunizations Recommendations for
Healthy Children, Adolescents, Adults, Seniors and Pregnancy
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2-19 years

The Guide to Clinical Preventive Services 2005, U.S. Preventive Services Taskforce 2005.

U.S. Preventive Services Task Force (USPSTF). Screening and Interventions for Overweight in Children and Adolescents. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2005 July.

U.S. Preventive Services Task Force (USPSTF). Screening for Human Immunodeficiency Virus Infection. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2005 July.

Recommended Childhood and Adolescent Immunization Schedule – United States, 2005(ACIP). American Academy of Family Physicians (AAFP) and the American Academy of Pediatrics (AAP), MMWR. 2005; 53: No. 51 & 52.

Centers for Disease Control and Prevention, Prevention and Control of Meningococcal Disease, Recommendations of the Advisory Committee on Immunization Practices (ACIP), MMWR 2005, 54: RR-7.

Centers for Disease Control, Pneumococcal Vaccination for Cochlear Implant Candidates and Recipients: Update Recommendations of the Advisory Committee on Immunization Practices (ACIP), MMWR 2003; 52: 31.

U.S. Preventive Services Task Force (USPSTF). Screening for Syphilis Infection. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2004 July 4.

U.S. Preventive Services Task Force (USPSTF). Screening for Gonorrhea Infection. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2005 May.

American College of Obstetrics and Gynecologists. (December 1999). Primary and Preventive Care: Periodic Assessments. Elk Grove Village, Ill.

Centers for Disease Control. 1998 Guidelines for Treatment of Sexually Transmitted Diseases. *MMWR* 47(RR-1):1-116, 1997.

Centers for Disease Control. (1999, January). Notice to Readers: Availability of Lyme Disease Vaccine. *MMWR Weekly*.

<http://www.cdc.gov/epo/mmwr/preview/mmwrhtml/00056299.htm> .

Centers for Disease Control and Prevention (1999, October). Prevention of Hepatitis A Through Active or Passive Immunization: Recommendations of the Advisory Committee on Immunizations Practices (ACIP). *MMWR Weekly*. *Mwr/rr/rr4812.pdf*
<http://ftp.cdc.gov/pub/Publications/mmwr/rr/rr4812.pdf> .

Centers for Disease Control and Prevention (2000, October). Preventing Pneumococcal Disease Among Infants and Young Children: Recommendations of the Advisory

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Healthy Children, Adolescents, Adults, Seniors and Pregnancy
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Committee on Immunization Practices (ACIP). *MMWR Weekly*.
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr4909a.htm> .

Institute for Clinical Systems Improvement. (2000, July) Health Care Guidelines:
Preventive Services for Adults. <http://www.icsi.org>

American Academy of Pediatrics Policy Statement. (1998, January). Tobacco, Alcohol,
and Other Drugs: The Role of the Pediatrician in Prevention and Management of
Substance Abuse (RE9801). *Pediatrics*101 (1):125-128.
<http://www.aap.org/policy/re9801.html> .

American Cancer Society. (1998, December). *Cervical Cancer: Detection and Symptoms*.
<http://www3.cancer.org/cancerinfo/main-cont.asp?st=cs&ct=8> .

19-39 years

The Guide to Clinical Preventive Services, 2005, U.S. Preventive Services Taskforce
2005.

U.S. Preventive Services Task Force (USPSTF). Screening for Human
Immunodeficiency Virus Infection. Rockville (MD): Agency for Healthcare Research
and Quality (AHRQ); 2005 July.

Centers for Disease Control and Prevention, Prevention and Control of Meningococcal
Disease, Recommendations of the Advisory Committee on Immunization Practices
(ACIP), MMWR 2005, 54: RR-7.

Centers for Disease Control, Pneumococcal Vaccination for Cochlear Implant Candidates
and Recipients: Update Recommendations of the Advisory Committee on Immunization
Practices (ACIP), MMWR 2003; 52: 31.

Centers for Disease Control and Prevention, Recommended Adult Immunization
Schedule – United States, October 2004 – September 2005, Recommendations of the
Advisory Committee on Immunization Practices (ACIP) MMWR 2004; 53:Q1-4.

U.S. Preventive Services Task Force (USPSTF). Screening for Syphilis Infection.
Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2004 July 4.

U.S. Preventive Services Task Force (USPSTF). Screening for Gonorrhea Infection.
Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2005 May.

Institute for Clinical Systems Improvement. (2000, July) Health Care Guidelines:
Preventive Services for Adults. <http://www.icsi.org>

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American Academy of Pediatrics Policy Statement. (1998, January). Tobacco, Alcohol, and Other Drugs: The Role of the Pediatrician in Prevention and Management of Substance Abuse (RE9801). *Pediatrics* 101 (1):125-128.

<http://www.aap.org/policy/re9801.html> .

American Cancer Society. (1998, December). *Cervical Cancer: Detection and Symptoms*.

<http://www3.cancer.org/cancerinfo/main-cont.asp?st=cs&ct=8> .

American Cancer Society. (1998, November). *Colon and Rectum Cancer: Detection and Symptoms*. <http://www3.cancer.org/cancerinfo/main-cont.asp?st=ds&ct=10> .

American Cancer Society. (1999, June). *Prostate Cancer: Detection and Symptoms*.

<http://www3.cancer.org/cancerinfo/main-cont.asp?st=ds&ct=36> .

American Medical Association (July 2001). Colorectal Cancer: Screening and Surveillance. <http://www.ama-assn.org/ama/pub/category/5246.html> .

Screening and Treating Adults for Lipid Disorders, Recommendations and Rationale, USPSTF. *American Journal of Preventive Medicine*, 2001; 20 (3S).

Executive Summary of the Third Report of the National Cholesterol Education Program Expert Panel on the Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults, *JAMA* May 16, 2001. Vol. 285 No. 19.

Prevention and Control of Influenza, Recommendations of the Advisory Committee on Immunization Practices (ACIP), *MMWR* April 20, 2001; Vol. 50 No. RR-4; 1-44

40-64 years

Agrawal S. et al. Colorectal Cancer in African Americans. *AM J Gastroenol.* 2005;100:515-523.

U.S. Preventive Services Task Force (USPSTF). Screening for Human Immunodeficiency Virus Infection. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2005 July.

Centers for Disease Control and Prevention, Prevention and Control of Meningococcal Disease, Recommendations of the Advisory Committee on Immunization Practices (ACIP), *MMWR* 2005, 54: RR-7.

Centers for Disease Control, Pneumococcal Vaccination for Cochlear Implant Candidates and Recipients: Update Recommendations of the Advisory Committee on Immunization Practices (ACIP), *MMWR* 2003; 52: 31.

Centers for Disease Control and Prevention, Recommended Adult Immunization Schedule – United States, October 2004 – September 2005, Recommendations of the Advisory Committee on Immunization Practices (ACIP) *MMWR* 2004; 53:Q1-4.

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2005

U.S. Preventive Services Task Force (USPSTF). Hormone Therapy for the Prevention of Chronic Conditions in Postmenopausal Women: Recommendation Statement. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2005 May.

Centers for Disease Control and Prevention (2001, April). Prevention and Control of Influenza: Recommendations of the Advisory Committee on Immunization Practices (ACIP) 50 (RR-4) *MMWR Recommendations and Reports*. <http://www.cdc.gov/mmwr>.

Institute for Clinical Systems Improvement. (2000, July) Health Care Guidelines: Preventive Services for Adults. <http://www.icsi.org>

American Academy of Pediatrics Policy Statement. (1998, January). Tobacco, Alcohol, and Other Drugs: The Role of the Pediatrician in Prevention and Management of Substance Abuse (RE9801). *Pediatrics*101 (1):125-128.
<http://www.aap.org/policy/re9801.html> .

American Cancer Society. (2000) Summary of American Cancer Society Recommendations for the Early Detection of Cancer in Asymptomatic People. <http://www3.cancer.org/cancerinfo> .

The Guide to Clinical Preventive Services, 2005, U.S. Preventive Services Taskforce 2005.

Screening and Treating Adults for Lipid Disorders, Recommendations and Rationale, USPSTF. *American Journal of Preventive Medicine*, 2001; 20 (3S).

Executive Summary of the Third Report of the National Cholesterol Education Program Expert Panel on the Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults, *JAMA* May 16, 2001. Vol. 285 No. 19.

Prevention and Control of Influenza, Recommendations of the Advisory Committee on Immunization Practices (ACIP), *MMWR* April 20, 2001; Vol. 50 No. RR-4; 1-44

Colorectal Cancer Screening: Clinical Guidelines and Rationale. *Gastroenterology*, 1997 Feb; 112 (2); 594-642. Reviewed 2001.

Screening for obesity in adults: recommendations and rationale. *Ann Intern Med* 2003 Dec 2;139(11):930-2.

65 plus

The Guide to Clinical Preventive Services, 2005, U.S. Preventive Services Taskforce 2005.

Centers for Disease Control and Prevention, Recommended Adult Immunization Schedule – United States, October 2004 – September 2005, Recommendations of the Advisory Committee on Immunization Practices (ACIP) *MMWR* 2004; 53:Q1-4.

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Centers for Disease Control and Prevention, Prevention and Control of Meningococcal Disease, Recommendations of the Advisory Committee on Immunization Practices (ACIP), MMWR 2005, 54: RR-7.

Centers for Disease Control, Pneumococcal Vaccination for Cochlear Implant Candidates and Recipients: Update Recommendations of the Advisory Committee on Immunization Practices (ACIP), MMWR 2003; 52: 31.

U.S. Preventive Services Task Force (USPSTF). Hormone Therapy for the Prevention of Chronic Conditions in Postmenopausal Women: Recommendation Statement. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2005 May.

U.S. Preventive Services Task Force (USPSTF). Screening for Abdominal Aortic Aneurysm. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2005 February.

Centers for Disease Control and Prevention (2004, May). Prevention and Control of Influenza: Recommendations of the Advisory Committee on Immunization Practices (ACIP) 53 (RR-6) *MMWR Recommendations and Reports*.
<http://www.cdc.gov/mmwrPDF/rr/rr5306.pdf>.

Institute for Clinical Systems Improvement. (2003, July) Health Care Guidelines: Preventive Services for Adults. <http://www.icsi.org>

American Cancer Society. (2002, November). New Cervical Cancer Early Detection Guidelines Released.
http://www.cancer.org/docroot/NWS/content/NWS_1_1x_New_Cervical_Early_Detection_Guidelines_Released.asp.

Please refer to the member's certificate booklet for available benefit. *Group specific policy and/or state mandates* will supersede this policy when applicable.

The Medical Policy is not an authorization, certification, explanation of benefits, or a contract. Eligibility and benefits are determined by the member's contract that is in effect at the time the services are rendered. This must be considered before medical guidelines and payment guidelines are applied. Receipt of benefits is subject to satisfaction of all terms and conditions of that coverage. All medical policies are written as a resource, which is based on research of current medical literature and review of common medical practices in the treatment and diagnosis of disease. Because medical practices and knowledge are constantly changing, Blue Cross of California reserves the right to review and update these policies periodically.